



## Day School Registration Form

Offer Code: \_\_\_\_\_

Start Date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Vet Phone: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

How did you find us: \_\_\_\_\_

Previous training: \_\_\_\_\_

What specific problems are you having? \_\_\_\_\_

What do we need to know about this dog?  
(shy with strangers, fearful or dislike other dogs, food aggressive, etc.) \_\_\_\_\_

(please use the back of the sheet if you need more room)

Day School Rate: \_\_\_\_\_ Deposit: \_\_\_\_\_ Balance Due: \_\_\_\_\_

**WAIVER:** I understand and acknowledge that dog training is an activity with inherent risks and hazards where serious accidents can occur, participants and/or spectators can sustain injuries and property damage. I acknowledge and willingly assume all of these risks and hazards. I assume full and complete responsibility for any injury to the person or property of anyone resulting from the actions or omissions of myself or my animal. I release and agree to indemnify DogSense Obedience, Inc., Debbi Snyder, Instructors, their agents, other students and their animals, and/or the facility where training is held for any injuries to my property, myself, or my animal sustained during, or related to, the activities or programs of DogSense Obedience, Inc., Debbi Snyder, Instructors, or their agents. I release DogSense Obedience, Inc., Debbi Snyder, Instructors, their agents from any acts and/or omissions that constitute negligence and/or recklessness, even if that includes rendering, or failing to render, aid. I agree to abide by the rules and regulations of DogSense Obedience, Inc., Debbi Snyder, Instructors, or their agents. Failure to abide by said rules and/or regulations by me, my representative, or my animal may result in dismissal from the program in progress with no refund.

**Class tuition is non-refundable.** Owner's signature represents that the enrolled dog is current on rabies, DHPP, Bordetella and Canine Influenza (supporting documentation may be required) and is not under the direction of animal control or any court (without written approval from DogSense Obedience, Inc.). In the event of illness or injury, I give DogSense Obedience, Inc., Debbi Snyder, Instructors, or their agents, permission to seek medical care for my dog, and will be responsible for the charges incurred.

I have read this document and understand that this document is binding on me, my heirs, my estate, my personal representatives and assigns. I agree that if any portion or clause of this waiver is deemed illegal or invalid that the rest of it shall remain valid and enforceable.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Send form signed and dated with the deposit to hold a position in Day School.**

**Please call (863) 647-4557 for a mailing address, to confirm availability and deposit amount.**