

Denise Smalt
607-776-5527

Pre-pay
REGISTRATION 2010
Location: _____

Class Time : _____
Willow Creek Kennel
Obedience Class

Please fill out as completely as you can, and **be sure to sign at bottom**, then **Call me** and send in with \$25.00 deposit.

Name: _____ # of people in family : _____
Address: _____ City: _____ Zip: _____
Home Phone: (____) _____ Work / Cell: _____ Email: _____

* Please Print Name (s) clearly below:

* **Person/Persons doing the training: (Will appear on Certificate)** _____ *

Dog's Name: _____ Breed: _____ Color _____
Age: _____ Male or Female Spayed/Neutered ? _____ When? _____ If not, Why ? _____
Where did you get your dog from ? Breeder _____ Shelter _____ Individual _____ Pet Store _____ Other _____ * **At what age ?** _____

Veterinarian / Vet Hospital: _____ Date of last visit? _____

Immunizations Due dates: Rabies: _____ Yearly DHLPP: _____ / Last Worming: _____ * **Kennel Cough:** _____

All dogs must be up to date on yearly vaccinations to attend class. (Puppies: As Needed for their age)

Yearly: Distemper/Parvo (or Titters blood work) and 3 year Rabies (3 yr. Distemper/Parvo Vaccine is Not Accepted) Questions: Please Call

* For indoor classes, we recommend kennel cough vaccine, it should be given 2 weeks prior to class, and lasts 4 months. But.... Kennel Cough – not required.

Commands your dog knows: _____

Problems you have with your dog: * _____

* **Aggression ? Yes / No** _____ **With people ?** _____ **With family members ?** _____ **Other dogs ?** _____

** If you are having Behavioral or Aggression Problems – a Private Lesson can be scheduled before this group class starts.

Goals for your dog (what do you want to learn from this class) _____

Your experience in training: _____ After this basic class, would you be interested in further training or any type of special training _____ What ? _____

How did you hear about this class/us: _____ Which Paper ? _____

Horseheads Location : * **Class Time (week 2-6) Class Time preference ?** _____ 5:00 _____ 6:15 Are you flexible on the time ? _____

Any concerns or questions : _____

Agreement To Hold Harmless, Waiver and Assumption Of Risk

I understand that attendance at a dog obedience class is not without risk to myself, members of my family or guests who may attend, or my dog. I hereby waive and release Willow Creek Kennel / Pete and Denise Smalt hereinafter referred to as "The Training Organization", its employees, officers, members and agents from any and all liability of any nature, for injury or damage which I or my dog suffer, including specifically, but without any limitation, any injury or damage resulting from the action of any dog. I expressly assume the risk of such damage or injury while attending any training sessions or any functions of the Training Organization, or while on the training grounds or the surrounding area thereto.

In consideration of an inducement to the acceptance of my application for training by the Training Organization, I hereby agree to indemnify and hold harmless the Training Organization, its employees, officers, members, and agents from any and all claims, or claims by any member of any family or any other person accompanying me to any training session or function of the Training Organization, or while on the grounds or surrounding area thereto as a result of any action by any dog including my own.

Signed: _____ Date: _____

6 Week Class : \$ 125 total Bath or Horseheads Location: _____

Please Mail the following : \$25.00 deposit, and this Registration Form (Call 1st)

To : Denise Smalt 7913 Cty Rt. 13 Bath N.Y. 14810

At First Class - Present the following: Balance due \$100 - Cash, and Vet records

Multiple dogs: \$ 195 for 2 dogs / same house, 1 booklet - Repeat Students within 4 months \$60.00

Training Collars - available at class

At Class: Cash or Money orders / Certified checks to: Denise Smalt *\$ 25.00 Charge on all returned checks. * **No Refunds -For any Reason**

Deposits may be transferred to another class, **if** prior arrangement & cancellation is made at least 1 week before registration/ first class.

Do not write below

Received: Records _____ DHLPP due: _____ Payment: Deposit: _____ Check / Money Order # _____ \$ _____
Rabies due: _____ Balance due: _____ Paid: Cash \$ _____