



Dog Training Class Registration Form

updated 8.9.18

General Information: Today's Date _____ Class Start Date _____

Class Level _____ Location _____ Time _____ Instructor _____

Owner's Name _____ Best Contact Phone # _____

Complete Address _____

Email _____

Dog's Information: Name _____ Breed _____ Age at First Class _____

Gender _____ Spay/Neutered _____ If your dog aggressive towards people or other dogs please explain:

Dog Training Program Vaccine, Refund and Make-Up Policy

Date: _____

I _____ (owner's name) owner of _____ (dog's name)

hereby state that I have presented up to date and accurate information regarding my dog's vaccine status. My dog's immunization history meets the Especially for Pets vaccine requirements. My dog also receives routine veterinary care. I understand that Especially for Pets has established a fair and safe vaccine protocol, putting my pet's health and safety at the forefront. Should my dog become infected with any transmittable diseases, I will indemnify, hold harmless and defend Especially for Pets, its officers, directors, agents and employees from any and all liabilities incurred from an illness.

I have also reviewed the policy regarding refunds and make-up lessons which states: "No refunds after 1st session for all classes and workshops. Refunds will be issued for the remaining number of sessions. Refunds will not be issued for missed classes. Since we cannot guarantee that an appropriate make-up session will be available, make-ups are available on a case by case basis. Please consult with your instructor."

Signature _____ Date _____

To be completed by pack member:

Veterinarian _____ Phone _____

Vaccine Dates: Rabies _____ DHPP _____ (or 3 year titer) _____ Kennel Cough _____

Stool Sample (pups under 6 mos.) _____

Amount Paid _____ Coupon Amount _____ Form of Payment _____

Confirmation Sent _____ Sales Associate _____