

Agreement & Registration Form for Dog Agility Classes Canine Team Training - Instructor Carol Ely

Instructor's Use Only
Jump Height: _____
Level: _____
Paid by: _____
Vaccinations checked –
Rabies, Parvo, Distemper

Fee _____ Start Date _____ End Date _____ Day of Wk _____ Time _____
Location _____

Payment and completed agreement are required upon sign up to hold your place in class. Please bring medical records showing current vaccinations to the first class. Admittance to class will not be allowed without signed waiver agreement, class payment and proof of required vaccinations. Payment is due prior to the start of training. No refunds will be given unless training is cancelled by Instructor.

Handler's (Client) Name _____
If under age 18 signature of parent or guardian: _____
Home Phone _____ Work Phone _____
Cell Phone _____ Email _____
Home Address _____
City _____ State _____ Zip _____

Dog's Name _____ Dogs Call name if different: _____
Breed _____ Variety: _____ Color _____
Dog's DOB _____ Age _____ Sex _____ Weight _____ Height at Shoulder if known: _____
If already experienced with agility, what height have you been jumping your dog? _____
Spay/Neutered? _____ Vet's Name _____
Vet's Location _____
Vet's Phone _____

How did you hear about Canine Team Training Agility Classes?

How long have you had your dog? _____ At what age did you get him/her? _____
Has your dog had formal (class) obedience training in the past? _____ If so, where? _____
Do you or your dog have any experience in agility? _____ If so, please explain: _____

Is there anything special you would like to see covered in class? _____

Are there any issues that are dog related that you are concerned about?

Are you looking to do dog agility just for fun or possibly future showing (trials)? _____

Client/Handler represents and warrants that the following are true and accurate statements and Client/Handler will forever indemnify Carol Ely/ Canine Team Training its agents, family, employees, and owners harmless for any and all inaccuracies Client makes about the Dog (check all that apply):

- Dog has been vaccinated against rabies, DHLPPC, and the vaccinations are current.
- Dog is in good health.
- Handler is healthy enough to move quickly with dog on agility course
- Dog has never bitten a person.
- Dog has never been declared a dangerous or potentially dangerous dog, or vicious or potentially vicious dog.

Signature: _____ Date: _____

Please print name: _____