



Purely Positive Dog Training, LLC
Owner & Head Instructor; Susan Marett
Registration Form

Registration forms must be mailed with a copy of your vaccination records, or you must bring a copy to the first class. Puppies must have three DHLPP vaccinations plus a Kennel Cough (Bordatella) vaccination. Adult dogs must be current on all vaccinations: DHLPP, Rabies, and Kennel Cough.

Owner Name: _____ Email Address: _____

Street Address: _____ City & Zip Code: _____

Phone #: Day _____ Evening _____

Dog's Name: _____ Breed (purebred or best guess!): _____

Spayed or Neutered: _____ Age: _____

Veterinarian: _____ Location & Class for which you are registering: _____

How did you hear about our classes?

Please tell us your concerns, comments, questions or any other important information about your dog:

Has your dog ever shown aggression (lunging, growling, baring teeth, snapping, and/or biting) to another dog or to a person?

By submitting the above form I/we, _____, agree that as consideration for use and enjoyment of the class and facilities, I/we hereby release Purely Positive Dog Training, Susan Marett, class instructors, employees, including those owning or working for the physical facility where classes are conducted, from any claims of damage or liability including attorney's fees, medical payments, property damage, or bodily injury damages.

I/we also agree that I am assuming the risk of participating in training where there are other dogs whose temperament is unknown to me: that I assume full responsibility for any injury that may occur to me, to my dog or dogs, or other property, or any damage that would ordinarily be due me, that I waive any right that I may have to institute any suit or other proceedings to recover therefore.

I/we further agree that there will be no refunds for missed classes or for the discontinuation of classes. If there is an unusual circumstance, the Instructor may make an exception at her discretion and assign a student to another class that will be convenient for both parties. If, for any reason, the Instructor cannot complete the class, a refund on a prorated basis, or a substitute Instructor, will be offered.

_____ I acknowledge that I have read and fully understand this document (Please initial)

Signed this _____ day of _____, 2007.

Please mail to: Susan Marett, 1216 Vienna Woods Road, Hanahan, SC 29410. Please make your check payable to Purely Positive Dog Training.