

Registration Form

Complete this form and mail to:

The Puppy Perfectors • 6523 California Ave SW # 358 • Seattle, WA 98136

Phone (206) 935-0289 • E-mail nancy@puppyperfectors.com

Facility Location: 3730 S. Dawson St, Seattle, WA 98118

Circle which class you are registering for - Puppy Kindergarten - Novice Drop-in – Agility
Level 1– Agility Level 2 – Conformation – Nose Work – Tricks – Other

Class start date or Orientation date: _____

Name of person(s) training the dog: _____

Address _____ City _____ Zip _____

Home phone _____ Cell phone _____

E-mail address _____

Call name of dog _____ Breed _____

Dog's Age & Birth Date: _____ Sex _____

Spayed/Neutered? _____ If yes, at what age?

Age obtained? _____ From where? _____

Have you trained a dog before? _____ When & Where? _____

State briefly any problems that you have and what you hope to accomplish.

Name of veterinarian: _____

Date of last Distemper and Parvovirus inoculation _____

Date of last worming or negative fecal sample: _____

How did you hear about our classes? _____

Release And Hold Harmless Agreement

NAME(S): _____

ADDRESS: _____

STATE: _____ ZIP _____ PHONE: _____

DOG'S NAME: _____ BREED: _____

Release of liability. In consideration of the opportunity to have this dog participate in training, I (we) agree to hold harmless and indemnify Nancy Hansen, The Puppy Perfectors LLC, and their instructors, agents, employees, successors and assigns from all actions, claims, demands for injury, loss or damage regardless of the cause.

Assumption of Risk. I understand and acknowledge that dogs can be extremely unpredictable in behavior and that the chance of injury to me and my dog is possible. I assume all risks related to being in the presence of other dogs and their handlers, and in bringing my dog to The Puppy Perfectors LLC, including but not limited to : illness; bodily injury; death; theft; falls; bites; collisions with vehicles; natural disasters; the unavailability of emergency medical care; or the negligent or deliberate acts of third parties.

I also understand that at times during classes, pictures of you, your dog, and or family members may be taken and used for publicity and/or promotional purposes without liability or obligation to you.

I have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.

OWNER/HANDLER

OWNER/HANDLER

DATE: _____

DATE: _____

Sign and return with your Registration Form