

REGISTRATION FORM



- Please mail back **this completed form;**
 veterinarian's certificate;
Liability Clause: **check payable to Mary Mahnke for \$80.00**

I hereby agree to hold harmless P.U.P., its owners, trainers, employees and representatives and Wheaton Rifle Club for any and all liability and claims for loss, damage or injury to any person, animal or object that may arise from my participation in training classes offered by P.U.P. or Mary Mahnke.

Furthermore, I assume all responsibility for loss, damage or injury to myself, my dog or my property which may have been caused by any act of any person in any way connected with the abovesaid classes. I will not now or in the future hold P.U.P. or Mary Mahnke liable for any damage my pet does to himself or another pet or person.

I hereby certify that the dog(s) that I enter in these classes will be current on all vaccinations (Canine Distemper, Leptospirosis, Corona, Parvovirus, Canine Viral Hepatitis, Bordatella and Rabies when age appropriate) and free from parasites by the time of the first session. I will provide a copy of receipts or a certification of vaccinations and fecal exam from my vet.

Refund Policy: Full refunds are available 14 days before the class starts. All but \$15 is refundable if you cancel 24 hours before the class begins. Once the class begins, there will be no refunds. Total fee is due by the beginning of the course.

I have read the above and understand its meaning.

Your signature

Date

Name _____

Dog's Name _____

Address _____

Breed or Mix/Color _____

City _____

Sex Male Female

State _____ Zip _____

Neutered Yes No

Telephone (home) _____

Dog's Birthdate _____

(work) _____

Veterinarian _____

How did you find out about this class? _____

- Class: **Beginner** Kindergarten (8-18 wks.) Older beginner (5 mos. & up) **Intermediate** Level A Level B **Advanced** **Trick Class** **Individual Private** Different fees apply **Behavior Workshop**

Day & Date _____

Time _____

