



DOG TRAINING REGISTRATION FORM

The following are the training programs we offer; please circle the training program(s) you are registering for.

PUPPY KINDERGARTEN \$310	BASIC OBEDIENCE \$310	PRIVATE OBEDIENCE SESSION \$115
	INTERMEDIATE OBEDIENCE \$310	KIDS & K9s: FAMILY PACK \$185
AKC CGC PREP & TEST \$195	ADVANCED OBEDIENCE \$310	TRICKS & GAMES CLASS \$285

Start date and time (please see attached flier for dates/time): _____

Your Name: _____ Primary phone no. _____

Address: _____ Zip _____

E-Mail: _____

Dog's name _____ Breed _____ Age _____ Sex _____

Spayed/Neutered? _____ YES _____ NO Who is your veterinarian? _____

How did you acquire your dog (rescued, purchased from a breeder etc.)? ~~How old was your dog when you brought them home?~~ _____

Does your dog have any health problems? _____

Please list any behavioral problems you are having with your dog: _____

What are the goals you wish to accomplish with your dog by participating in one of our training programs? _____

Have you participated in any dog training with this dog in the past? _____

Is your dog housetrained? _____ YES _____ NO

Is this the first dog that you have owned? _____ YES _____ NO

Does your dog come reliably when called off leash? _____ YES _____ NO _____ SOMETIMES

Does your dog walk obediently on leash? _____ YES _____ NO _____ SOMETIMES

How much exercise does your dog get each day? _____

How often do you walk your dog, how long are the walks? _____

Is your dog crate trained? _____ **YES** _____ **NO**

If so, how much time each day does your dog spend in the crate? _____

Who will be the primary handler or handlers attending training sessions (Please list children names & ages for Kids & K9's class)? _____

Are there any other pets in your household? If so, what kind and what are their ages? _____

Has your dog ever shown any concerning behavior towards any other dogs or people (excessive barking, growling, biting etc.)? _____

How did you hear about us? _____

Please Note:

- **Payment:** Please submit this completed and signed registration form along with payment to complete the enrollment process.

Mail completed registration form along with a check payable to Muddy Creek Animal Care Center.

Payment should be sent to 993 Haverhill Street Rowley, MA 01969. We also accept credit cards as a form of payment. Should you elect to pay via credit card please call our office at 978-948-2345.

- **Refunds:** Muddy Creek will refund Puppy Kindergarten, Basic Obedience and Advanced Obedience course fees only when notified within 48 hours after the first class session. Muddy Creek will refund Private Training Sessions or The Family Pack: Kids and K9's course fees only when notified within 48 hours prior to the first training session. Refund includes price of program in which enrolled, minus a \$25 processing fee.

- **Vaccinations:** Owners must provide proof of up-to-date rabies, parvo, distemper, influenza and kennel cough vaccinations 5 days prior to the first class from their veterinarian office. Puppies must have proof of up-to-date vaccines suggested for their age by their veterinarian 5 days prior to the first class. Proof of an annual negative fecal sample must also be provided prior to class start.

WAIVER, ASSUMPTION OF RISK AND AGREEMENT TO INDEMNIFY AND HOLD HARMLESS

I UNDERSTAND THAT ATTENDANCE AT A DOG TRAINING PROGRAM OR EVENT IS NOT WITHOUT RISK TO MYSELF, MEMBERS OF MY FAMILY, ANY OF MY GUEST'S WHO MAY ATTEND, OR MY DOG. I HEARBY WAIVE AND RELEASE VETCOR, MUDDY CREEK ANIMAL CARE CENTER, ANY EMPLOYEES OR AGENTS, AND ASSISTANTS, FROM ANY AND ALL LIABILITY OF ANY NATURE, FOR INJURY OR DAMAGE WHICH I OR MY DOG MAY SUFFER, INCLUDING SPECIFICALLY, BUT NOT LIMITED TO, ANY INJURY OR DAMAGE RESULTING FROM THE ACTION OF ANY DOG OR USE OF, OR PRESENCE UPON PREMISES OF EQUIPMENT; AND I EXPRESSLY ASSUME THE RISK OF ANY SUCH DAMAGE OR INJURY WHILE ATTENDING ANY CLASS OR ACTIVITY OR WHILE ON THE CLASS OR ACTIVITY GROUNDS OR THE SURROUNDING AREA THERETO.

IN CONSIDERATION OF AND AS INDUCEMENT TO THE ACCEPTANCE OF MY REGISTRATION FOR PARTICIPATION IN THIS PROGRAM OR ACTIVITY, I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS VETCOR, MUDDY CREEK ANIMAL CARE CENTER, THEIR EMPLOYEES, AGENTS, AND ASSISTANTS, FROM ANY AND ALL CLAIMS, OR CLAIM BY ANY MEMBER OF MY FAMILY OR OTHER PERSON ACCOMPANYING ME TO, OR MEETING ME AT, ANY CLASS OR EVENT OR WHILE ON THE CLASS OR EVENT GROUNDS OR THE SURROUNDING AREA THERETO.

SIGNATURE OF OWNER OR AUTHORIZED AGENT (MUST BE OVER 18 YEARS OF AGE):

SIGNATURE: _____ **DATE:** _____