

THE CANINE DIPLOMAT, LLC REGISTRATION FORM

EMAIL:	PHONE:	
DOG'S NAME:		
DOG INFORMATION		
How old was your dog when you got it?		
Where did you get your dog? (circle one	e) BREEDER SHELTER/POUND	RESCUE
Describe your dog's personality and beh	navior when purchased / adopted:	
Is this your first dog? How many people live are in your house		
	Females: Ages:	
Where does your dog spend most of his/	her time?	
How many hours a day does your dog sp	pend alone?	
Has your dog ever shown aggression (gr		ults, children, dogs, othe
animals, other. If yes please circle above		
To better serve you what are you lookin	ng to achieve in this class? What type	are goals are you seekin

CONTINUE REGISTRATION NEXT PAGE
Dog's License NumberTown / State
Name of your Veterinarian:
Veterinarian's Phone number:
Dog's Last Rabies Shot?
Parvo Shot (usually part of the DAPP/DHPP vaccine?)
RELEASE & HOLD HARMLESS
In consideration of admittance to training / obedience instruction to be conducted by Rose Ann Reggiano, the undersigned hereby releases and forever discharges Rose Ann Reggiano, her officers and instructors from any and all claims, demands, and liabilities to the undersigned on account of losses and damages of any injuries to the undersigned's person and/or property, including the undersigned's dog(s) which may result during the course of the undersigned's participation in training /obedience classes.
The undersigned also hereby covenants and agrees, in consideration of the said admittance, to defend, protect, and save harmless Rose Ann Reggiano, officers and instructors from any loss, damage, or expense, by reason of litigation or otherwise on account of claims, liabilities and injuries to the person or property of third parties arising directly or indirectly out of the undersigned's and the undersigned's dog's participation in said classes.
Photo Release: The Canine Diplomat may videotape or take photographs of participants enrolled in training / obedience introduction. These photos and/or videos may be used for promotional purpose.
Signature:
Print Full Name:
Date:

NOTICE:

ALL HANDLERS MUST BE AT LEAST 14 YEARS OF AGE. A PARENT OR GUARDIAN MUST SIGN THIS FORM IF THE HANDLERS IS UNDER 18 YEARS OF AGE. DURING CLASS, A PARENT/GUARDIAN OR RESPONSIBLE ADULT MUST REMAIN WITH THE HANDLER WHO IS UNDER 18 YEARS OF AGE.

NO VIDEO CAMERAS OR PHOTOGRAPHY DURING CLASS.

NO REFUNDS FOR SESSION DROP OUTS OR MISSED CLASSES!