

Puppy Class Registration Form

(Please print clearly)

Your name: _____ Date: _____

Address: _____

Phone Numbers: _____

Email address: _____

Puppy/Dog's Name: _____

Breed: _____ Age/weeks: _____

Where did you obtain your dog? _____

Who is your vet? _____

How did you find out about us? _____

All dogs must be free of parasites and up to date on vaccinations before participating in class. Proof of Vaccinations: _____



Paid: Cash _____

Check# _____

Release and Hold Harmless Agreement

The Undersigned assumes the unavoidable risks inherent in all dog-related activities, including but not limited to bodily injury and physical harm to dog, owner, and friends or family members present during training classes. In consideration, therefore, for the privilege of training and/or working around dogs with The Puppy Ladies located at 3092 Hawks Landing Drive in Tallahassee, Florida, the Undersigned or to any dogs owned by or fostered by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises, the Undersigned does release all the Puppy Ladies Staff, volunteers and representatives from liability deriving from any class or play activities. The Undersigned does understand this is a commitment, which includes all activities on the premises.

Signature _____

Print _____

