

## KINDRED HEARTS DOG TRAINING REGISTRATION FORM 503-420-2583

NAME:	<u>-</u>	
ADDRESS:	CITY:	
STATE:	ZIP CODE:	
HOME PHONE:	CELL PHONE:	
EMAIL ADDRESS:		
DOG'S NAME:	BREED: AGE:	
VET'S NAME:	VET'S PHONE NUMBER:	
\$150.00 CLASSES (6 week courses) \$50.00 non refundable deposit fee to hold a spot		
Basic Obedience	Puppy Kindergarten	
Intermediate	Trick/Agility	
Advanced	Outdoor Class	
	CGC	
PRIVATE SESSIONS:  Due to Covid 19 all privates will be at the training center or outdoors		
\$75.00 per session.		

## **ITEMS TO BRING TO CLASS:**

- VACCINATION RECORDS FROM YOUR VETERINARIAN
- 4' to 6' leather or nylon leash ( no flexi or chain leash)
- Flat (buckle or quick snap) collar, with tags must be worn. A gentle leader or Halti (head collars) and some no- pull harnesses can also be worn. (*no choke or prong collars*)
- A variety of approximately 150 pea- sized soft treats that the dog really likes.
- Treat pouch or something to carry treats in
- Please dress comfortable and wear proper shoes to prevent injuries.

## LEGAL AGREEMENT AND REALEASE

- 1. By completing registration and in consideration of being permitted to use the services and facilities of Kindred Hearts Dog Training ("KHD"), I the undersigned legal owner hereby release ,waive, and discharge KHD, its owners and staff from all liability for any and all loss or damage, and any claim or damages resulting therefrom, on account of injury, loss, damage , ailment or disease to my dog, even injury resulting in death, while my dog is on the premises of KHD.
- 2. I agree to indemnify KHD, it owners and staff for any loss, liability, damage or cost they may incur due to my presence or the presence of my dog in or upon KHD premises.
- **3.** I hereby assume full responsibility for any harm caused my dog while in or upon KHD's premises. I further agree to indemnify KHD, its owners and staff for any loss, liability, damage or cost they may incur due to any harm caused by my dog.
- **4.** I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the State of Oregon and that if any portion thereof is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force and effect.
- **5.** I further understand and agree that in admitting my dog to KHD, the owners and staff of KHD have relied on my representation that my dog is in good health and as not harmed or shown aggression or threatening behavior toward any person or any other dog.
- 6. I UNDERSTAND THAT FOR THE SAFETY OF ALL PETS, OWNERS MUST SHOW COMPLETE VACCINATION RECORDS FROM YOUR VETERINARIAN OR BREEDER AT THE FIRST CLASS TO PARTICIAPATE.

I accept all the terms, conditions and statements of the Agreement &		
Release.		
Dog's Name		
Signature of legal owner	Date	