



MR. PET'S

EVERYTHING FOR YOUR PET

Dog Training Registration Form

Start Time: _____ Start Date: _____

Name of Handler(s): _____

Mailing Address: _____

City: _____ Postal Code: _____

Phone # _____ Cell # _____ (text Y/N)

E-mail address (for updates): _____

Name of Dog: _____ Breed of Dog: _____

Age of Dog (min 4 months): _____ Dog's Birthday: _____

Sex: M ____ F ____ Spay or Neutered: _____

How did you acquire your four-legged friend?

Pet Store Breeder S.P.C.A. Rescue Other _____

How old was your dog when you brought him/her home? _____

Is your dog friendly towards people? Yes If No why _____

Is your dog friendly other dogs? Yes If No why _____

Has your dog ever bit another dog or person? No If Yes why _____

Does your dog have any physical disabilities? No If Yes why _____

How did you hear about our class: _____

Proof of Vaccinations is required. See Customer Information sheet for more details

Equipment Recommended: All equipment needed for training will be discussed in the first class. Absolutely NO retractable leashes allowed. You will receive 10% off all required equipment at the store. If your dog is aggressive a muzzle is required.

Cancellation Policy: If you have to cancel for any reason, we require two weeks notice in order for you to receive a 50% store credit towards the next class. Not store credit will be issued for cancellations with less than two weeks notice.

I understand and agree that Mr. Pet's, its contract trainers and employees shall not be held liable for any costs or expenses incurred in connection with any claim occurring as a result of my, or my pet's participation in this program. Mr. Pet's, its contract trainers and employees will not be liable for any injury or damage to any person, animal or property, which results from the behavior of my pet during the training program.

Customers Full Name: _____

Customers Signature: _____ Date: _____