

PEPP K-9 REGISTRATION FORM (download, fill, return via contact us form)

CLIENT SECTION

CLIENTS NAME: _____

ADDRESS: _____

PHONE: _____

CELL: _____ EMAIL: _____

DOG'S NAME: _____

DOG'S AGE: _____ SPAYED/NEUTERED _____

DOG'S BREED: _____ *PLEASE BRING CURRENT VACCINATIONS TO 1ST CLASS

WHICH CLASS (some conditions may apply-see website) PLEASE INITIAL CLASS OPTION AND ALSO IF ONLINE

PUPPY: _____

RELIABLE DOG (BEGINNER): _____

STELLAR DOG (INTERMEDIATE): _____

ADVANCED INTERMEDIATE: _____

PRIVATE CLASSES: _____

ONLINE CLASSES DUE TO COVID CRISIS (PRICES/DETAILS WIL BE SENT EMAIL)

WHAT DATE:

DATE OF PROGRAM CHOSEN: _____

TIME: _____

READ AND INITIAL

AS A CLIENT OF PEPP K9 TRAINING SERVICES I UNDERSTAND THAT I AM SOLEY RESPONSIBLE FOR THE BEHAVIOUR OF MY DOG AND DO NOT HOLD PEPP K9 TRAINING SERVICES OR THEIR OWNER/OTHER HELPERS/STAFF RESPONSIBLE FOR ANY DAMAGES, INJURIES OR LOSS OF VALUABLES PERTAINING TO MYSELF OR MY DOG OR INJURIES TO OTHERS DURING THESE CLASSES OR FROM ONLINE CLASSES OR AT ANY LOCATION _____ (initial of client)

I UNDERSTAND THERE ARE NO REFUNDS FOR ANY REASON (YOU HAVE TAKEN A SPOT) _____ (initial of client) AND THAT PEPP K9 IS NOT RESPONSIBLE FOR ANY BEHAVIOURS/INJURIES YOUR DOG MAY SUSTAIN OR CAUSE WHEN IN CLIENT'S CARE AT HOME OR ELSEWHERE. WE DO OUR BEST TO GUARANTEE RESULTS BUT IT IS INCUMBENT ON THE CLIENT TO CONTINUE PRACTICING. WE ARE NOT TO BE HELD RESPONSIBLE FOR FAILURE OF DOG TO COMPLY.

I HAVE READ AND UNDERSTOOD ALL OF THIS REGISTRATION FORM AND AGREE

SIGNATURE OF CLIENT (to be signed in person 1st day of class) _____ (online classes initial here also)

OFFICE ONLY

CLIENT PAID IN FULL _____ (note any discounts. NOTES: