



Training Registration & Release of Liability

Owner Information

First Name	Last Name	Phone
Address		City, State & Zip Code
Email Address		Phone
Are There Children in Your Home?		Ages
Primary Handler		Age
How did you hear about us?		

INFORMATION ON YOUR PET

Dog's Name		Breed
Age	Sex	Altered? Y N
Registered?		Date of Last Exam
Veterinarian		
Where did you get your dog?		

TELL US ABOUT YOUR DOG'S PERSONALITY

TELL US WHAT POSITIVE BEHAVIORS YOU FEEL ARE MOST IMPORTANT

HOW DO YOU SOCIALIZE YOUR DOG – OR PLAN TO?

TELL US ABOUT YOUR EXPERIENCE WITH DOGS

DESCRIBE YOUR PETS BEHAVIORAL CHALLENGES

The undersigned Client completely understands and agrees that the handling of dogs can be a hazardous activity at times. Ever present is the risk of injury to both handler and dog including but not limited to, dog attacks, dog bites and complications arising therefrom. In so much as dog and human behavior is at times unpredictable, Client understands that such risks are inherent and cannot be eliminated.

Client therefore voluntarily releases and discharges the SW Florida Professional Dog Trainers Alliance, Inc., PAWS Assistance Dog Program, The Humane Society Naples, its instructors, officers, directors, agents, or employees, from any liability for any injury or loss suffered by the Client or Client’s Dog including but not limited to attacks, bites and injury of any kind. This includes injury or loss caused by the active or passive actions or recommendations of The SW Florida Professional Dog Trainers Alliance, Inc., The Humane Society Naples, Inc., or its instructors, officers, directors, agents, or employees.

Client agrees and accepts all risk and liability of ownership of their animal and agrees that Client is completely responsible for the behavior of their dog and as such is/will be held responsible for any and all medical costs, property damages, personal injury or loss to any person and/or other dogs, including but not limited to reasonable veterinary costs, medical supplies, care or equipment, and/or legal fees resulting from Client’s behavior or the behavior of their dog.

Furthermore, by the execution of the Client’s signature below, Client voluntarily waives his/her right to bring or maintain a lawsuit designed to collect monetary damages on account of any injury, damage or claims whatsoever against The SW Florida Professional Dog Trainers Alliance, Inc., and/or The Humane Society Naples, Inc., its instructors, officers, directors, agents, or employees.

It is also agreed that no promise or guarantee is either given or implied as to the results that may be achieved with any behavior modification, training program and/or any product or other service that I or my dog have taken part in or had use of.

SIGNATURE

DATE