



## REGISTRATION – TRAINING SERVICES

### PERSON INFORMATION

Name: \_\_\_\_\_ Phone 1: \_\_\_\_\_ h w c <sup>home</sup>

Street address: \_\_\_\_\_ Phone 2: \_\_\_\_\_ h w c <sup>cell</sup>

Mailing address: \_\_\_\_\_ Phone 3: \_\_\_\_\_ h w c <sup>work</sup>

City/Prov.: \_\_\_\_\_ Email 1: \_\_\_\_\_ h w

Postal Code: \_\_\_\_\_ Email 2: \_\_\_\_\_ h w

Occupation/Company: \_\_\_\_\_ Other family members (names, ages): \_\_\_\_\_

Partner/Spouse Name: \_\_\_\_\_ Other pets: \_\_\_\_\_

Spouse Occupation: \_\_\_\_\_

### DOG INFORMATION

Name: \_\_\_\_\_ Birthdate (or best guess): \_\_\_\_\_

Gender:  Male/neutered  Female/spayed  Male intact  Female open

Breed (or best guess): \_\_\_\_\_

### HEALTH INFORMATION:

Veterinary Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

Current or pre-existing health conditions and/or important medical history (i.e. Allergies, sensitive stomach, medication):  Yes  No

If Yes, describe: \_\_\_\_\_ (more on back)

### BACKGROUND INFORMATION

How did you hear about Paw in Hand? \_\_\_\_\_

Has your dog ever participated in any other professional services before:

Daycare / Walking / Boarding?  Yes  No If yes, where and details about how your dog did with the experience: \_\_\_\_\_

Dog Training class, program or other?  Yes  No If yes, where and details about how your dog did with the experience: \_\_\_\_\_

### BEHAVIOUR: (Omit if puppy)

Has your dog ever shown any lunging, growling, baring teeth, snapping, nipping, biting or aggressive behavior?

To other dogs:  Yes  No If yes, please describe \_\_\_\_\_ (more on back)

To any people:  Yes  No If yes, please describe \_\_\_\_\_ (more on back)

Has your dog ever *been* bitten by another dog?  Yes  No If yes, describe: \_\_\_\_\_

Does your dog have fears?  Yes  No If Yes, what is object of fear? \_\_\_\_\_

If yes, please describe behaviour \_\_\_\_\_ (more on back)

Does your dog exhibit any of the following behaviors? (Please check all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Bark/whining Excessively | <input type="checkbox"/> Escape (jump, dig, etc.) | <input type="checkbox"/> Leash pulling                |
| <input type="checkbox"/> Carsickness              | <input type="checkbox"/> Guarding item/food       | <input type="checkbox"/> Prey aggression (cats, etc.) |
| <input type="checkbox"/> Chase bike/vehicle/etc.  | <input type="checkbox"/> Handling/sensitive       | <input type="checkbox"/> Separation anxiety           |
| <input type="checkbox"/> Counter surfing          | <input type="checkbox"/> House soiling/Marking    | <input type="checkbox"/> Other: _____                 |
| <input type="checkbox"/> Destructive              | <input type="checkbox"/> Jumping up               |   |

If any of the above applies, please explain: \_\_\_\_\_ (more on back)

### TRAINING:

Rate your dog's response to the following obedience commands from 0 (never) – 10 (reliable)





Recall  
Down  
Stay 0 1 2 3  
Drop / Leave it

What are some of your training challenges? \_\_\_\_\_

What are some of your training successes? \_\_\_\_\_

**OTHER:**

Additional information that we should know: \_\_\_\_\_ (more on back)

**AGREEMENT TO HOLD HARMLESS, ASSUMPTION OF RISK & RELEASE**

**Dog Requirements.** My dog is suitable to participate in Paw In Hand training programs and has NOT seriously injured another dog or human. All behavioural concerns and issues have been and will continue to be fully disclosed to Paw In Hand prior to registration. I understand that Paw In Hand has the right to refuse service to me or my dog at any time for any reason; including but not limited to behaviour (past or present), age, health or any other reason. \_\_\_\_\_ **Client Initial**

**Responsibility.** I am and will remain responsible for the actions of my dog and myself at all times. I acknowledge that my dog's behaviour now and in the future is solely my responsibility. Should any behaviour on my dog's part result in damage to the property, owners, or person of a third party, I agree to assume full liability for any and all such damage, and to absolve Paw in Hand from any and all obligations to pay such damage. \_\_\_\_\_ **Client Initial**

**Participation.** I accept that there are inherent risks even in situations that may appear safe, including and not limited to the risk of having my dog around other dogs, people, cyclists, wildlife and potentially hazardous environments. I acknowledge that Paw In Hand will take reasonable actions to minimize these risks, but I understand that it is not always possible to prevent injuries that may occur. I understand that the degree to which a dog is successfully trained is a function of the interest, commitment, and cooperation of the owner. I acknowledge and agree that there is no guarantee that my dog will achieve the desired level of training despite the best efforts of the instructor. \_\_\_\_\_ **Client Initial**

**Health.** I hereby declare that my dog is in good health and parasite free and has not been ill with a communicable condition within the last 30 days. I am responsible for ensuring my dog receives all recommended vaccinations, Bordatella (kennel cough), flea preventative, parasite control program and other treatment as recommended by my veterinarian. I understand that my dog may be in the company and environment of other dogs and this may involve risks regarding the contraction of illness and take full responsibility in the event that my dog contracts any associated condition. \_\_\_\_\_ **Client Initial**

**Photo Release.** From time to time photographs and videos may be taken of handlers and dogs participating in Paw In Hand services and activities. I give Paw In Hand permission to use all such photos and videos for purposes, including but not limited to publications, promotional brochures, promotions or showcase programs on our website and Facebook page, showcase of activities in local and /or national newspapers. Only names of pets will be published. \_\_\_\_\_ **Client Initial**

**Payment.** I understand that payment for services is due at the time of service and is non-refundable. Payment for services that are scheduled in the future are also non-refundable unless extraordinary circumstances arise that prevent the service from being carried out. The responsibility of the decision for the return of the funds is solely on Paw In Hand. \_\_\_\_\_ **Client Initial**

**Waiver, Release and Indemnification.** I hereby indemnify and hold harmless Paw in Hand Pet Services, its officers, directors, owners, employees, facility owners, instructors, assistants and any other agents of these establishments of any and all liability and claims of any nature, by any member of my family, or guests of mine of injury, expense, cost or damages to myself, my dog or any handler sponsored by me while attending any training session or other function of class on consultation on the training grounds or the surrounding area thereto. In addition, I agree that I will defend and indemnify Paw in Hand for any injury, expense, costs or damages to any dog handlers or dogs, whether sponsored by me or not, or to third parties arising out of my own actions or the actions of my dog. \_\_\_\_\_ **Client Initial**

**By initialing the client acknowledges reading and their agreement with:**

- Training Services Agreement **Client Initial** \_\_\_\_\_

**My signature on this document indicates that I have completely read the above and clearly understand and agree to all of its terms. The signature below validates this contract as approval for future training services without additional written authorization for one year from the date of this signed release form. This form will be deemed signed and accepted if sent via email.**

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ at the Municipality of Squamish, British Columbia.

**Owner Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_