

For Internal Use Only:
_____ Vaccination Proof

_____ Paid _____ Waiver

Bunker Hill Dog Training Registration Agreement

Handler/Owner's Data

Name _____ 18 Years or older? _____ Yes
_____ No

Address _____

City/State/Zip _____

Telephone: Work _____ Home _____
Cell _____

E-mail

Address: _____

Where did you hear about these classes? _____ Newspaper _____ Flyer _____ Referral _____ Other

Name of Newspaper or
Referral: _____

Dog's Data

Dog's Name _____ Breed _____

Circle: Male Female Spayed/Neutered _____ Yes _____ No Dog's Age _____

Veterinarian's name and number _____

What problems are you having with your dog?

Who is responsible for care and feeding in your household?

Dog lives: _____ Indoors _____ Outdoors _____ Out day/In night

Dog has a problem with: _____ Children _____ Other Dogs _____ Adults _____ Cats

_____ Other
(Describe) _____

Where was dog obtained? _____ Breeder _____ Shelter _____ Stray _____ Pet Store _____ Newspaper Ad

_____ Other
(Describe) _____

Class: _____ Day & Time: _____ Start

Date: _____

Please return this completed, signed registration agreement along with a copy of
vaccination/worming records and the appropriate registration fee(s) to:
Bunker Hill Dog Training, 6982 S. Bunker Hill Road, German Valley, IL 61039 E-MAIL: regole06@yahoo.com

PLEASE COMPLETE AND SIGN REVERSE SIDE OF THIS FORM

How long have you owned your dog?

How many adults are in your household? _____ Children? _____ Ages of Children?

Do either you or your dog have any medical condition or handicap that we should be aware of? (If so, what is the condition?)

PERSON TO CONTACT IN THE EVENT OF AN EMERGENCY (Not yourself)

Name: _____ Phone _____

Number: _____

AGREEMENT:

I (we) fully understand that I am responsible for the control of my dog at all times while on the premises of Bunker Hill Dog Training. I agree to hold this business, its owners, directors or agents harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or upon the premises or grounds or near any entrance thereof and I (we) personally assume all responsibility and liability for any such claim and I (we) further agree to hold the aforementioned parties harmless from any claim for loss of this dog by disappearance, theft, death or otherwise, and from any claim for damage or injury to the dog, whether such loss, disappearance, theft, damage or injury be caused or alleged to be caused by the negligence of any of the parties aforementioned, or by the negligence of any other person, or any other cause or causes. I (we) hereby assume the sole responsibility for and agree to indemnify and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this class howsoever such injuries, death or damage to property may be caused, and whether or not the same may have been caused or may allege to have been caused by negligence of the aforementioned parties or any of their employees or agents, or any other person. I agree to abide by the Rules and Requirements and I have received a copy of same prior to signing this agreement. I understand that the registration fees are non-refundable.

ANY PARTIES UNDER 18 YEARS OF AGE MUST BE ACCOMPANIED BY A PARENT OR GUARDIAN WHO MUST ALSO ATTEST AND AGREE TO THE AFOREMENTIONED STATEMENTS. THE PARENT OR GUARDIAN WILL BE HELD RESPONSIBLE AND LIABLE FOR THE MINOR'S CONDUCT AND SAFETY WHILE ON THESE PREMISES.

Owner(s)

Date

Handler

Date