

Collinswood K-9 Services

Phone: 508-832-9394
81 West Street
Auburn, Ma.
01501-1014

Email: collinswoodk9@charterinternet.com
www.collinswoodk9.com
Fax: 508-832-9016

Application for Attendance. This completed form along with a non-refundable deposit of \$25.00 are required to reserve a space in any of our 4 or more week courses.

Please make checks out to Collinswood K-9 Services

Course Applied For:

Agility: Beginner _____ Advanced Beginner _____ Intermediate _____ Advanced _____

Obedience: Puppy Kindergarten _____ Beginner/Basic Behavior _____ CGC Prep _____

Competition Obedience: Beginner Attention _____ Novice/Heeling _____ Rally _____

Conformation Breed Handling: Beginner _____ Advanced _____

Start date : _____ time: _____

*Please note: Our training methods are based on Positive Reinforcement with minimal Corrections!
Group Classes are not appropriate for aggressive dogs. We recommend private consultation.*

Dog's Name _____ Breed _____ Age _____

M/F Spayed/Neutered Color _____ Veterinarian _____

Owner's Name (Print) _____ Today's date _____

Address _____

City _____ State _____ Zip code _____

email _____

Phone # _____ Work# _____ Cell# _____

Level of Training /Titles- _____

Problems - _____

Release and Waiver of all liability and Indemnification Agreement:

In consideration of, and as an inducement to the acceptance of my application for attendance and participation in activities at Collinswood K-9 Services, the UNDERSIGNED hereby agrees to abide by the rules and regulations of their instructors. I expressly assume the risk while at 81 West Street, Auburn Ma. 01501, including specifically but not without limitation, any injury or damage resulting from the action of any dog. I hereby agree to indemnify and hold harmless the above named Collins, and their instructors and assistants from any and all claims or claims by members of my family as a result of any action by any dog, including my own. I understand that the instructors have the right to refuse to instruct any aggressive dog at their discretion, in which case no refunds will be given. Please note: Once classes have been started, class fees are non-refundable. In the event of a medical condition of dog or owner preventing attendance in scheduled classes, any unused class will be kept on account for future use.

Signature of Owner _____

If under age 18, parent or guardian must also sign _____

OFFICE USE ONLY

Vaccination or Titer Proof

Rabies _____ Due _____

Kennel Cough _____ Due _____

Distemper _____ Due _____