

Registration Form & Training Services Agreement Group Class Programmes and Workshops



| | | | |
|---|-----------|--|---|
| Dog's Name | | | |
| Owner / Handler | | If you wish, indicate your preferred personal pronoun: | |
| Street Address | | Breed or Breed mix | |
| City | | Date of Birth (or age) | |
| P/Code | | Age at purchase | |
| Tel | | Dog's gender status | <input type="checkbox"/> Male intact <input type="checkbox"/> Female intact |
| Cell | | | <input type="checkbox"/> Male neutered <input type="checkbox"/> Female spayed |
| Email address | | How did you find out about us? | |
| Please indicate whether you consent to have your email address added to our email list. You can unsubscribe at any time. | | YES | NO |
| Dog's Veterinarian | | | |
| Dog's Medical Issues, including Allergies | | | NONE |
| Dog's Medications | | | NONE |
| Has Dog ever bitten a dog or a person? | NO | YES | If "Yes", please contact us to discuss. |
| What training have you done to date? | | | NONE |
| Training goals for your Dog | | | |

FOR PUPPY START RIGHT PROGRAMME ONLY

We are offering Puppy Socialization classes for puppies at 8-16 weeks of age, or up to 18 weeks of age for "late starters" that join our class at 14 weeks or later. At their youngest, these puppies will not yet be old enough to have received all their standard vaccinations, so **in addition to proof of initial vaccination, we require a declaration from your veterinarian to say that your puppy is in good health, and we encourage you to discuss your puppy's attendance in this class with your veterinarian.** Research has shown that it is very important for puppies to receive socialization from a young age, before they have been fully vaccinated – please refer to the *AVSAB Position Statement On Puppy Socialization*, available from our website, or from the American Veterinary Society of Animal Behavior website www.AVSABonline.org.

Veterinarian's Declaration

I have seen this puppy today and the puppy appeared to be in good health and did not appear to show any signs of any communicable disease or parasites that would prevent this puppy from participating in your dog training classes.

| | |
|----------------------|--------------------------|
| Date | Veterinarian's signature |
| Veterinarian's stamp | |

WE ASK STUDENTS TO PLEASE AVOID WEARING SCENT WHEN ATTENDING CLASSES.

The chemicals used in scented products can make some people sick, especially those with fragrance sensitivities, asthma, allergies and other medical conditions.



PLEASE READ THE NEXT PAGE CAREFULLY AND SIGN ON BOTTOM.

ATTENDANCE & FIRST CLASS: Classes are strictly limited as to number of students, to maximize the time for personal attention and individual coaching. Please register online or via telephone before attending a class. *For your first class, please arrive 15 mins early if you need to complete your registration process.* Please keep your Dog on leash at all times and scoop the poop.

FAMILY: Family members, including children over the age of 6 years, are most welcome to attend class with you. Children must, however, be able to sit quietly for the entire class. You are responsible for your child at all times. Unfortunately, we do not have anybody available to help mind your child for you. Children can be wonderful when it comes to socializing and training puppies, but please BE AWARE that your child may be at risk from some dogs that may not be as comfortable around children as your own Dog may be.

Your child must NEVER UNDER ANY CIRCUMSTANCES approach any of the other dogs in class, or otherwise interact with people, dogs or equipment, without first receiving EXPRESS PERMISSION FROM THE INSTRUCTOR. YOU ARE LIABLE for your child's actions AT ALL TIMES.

MINIMUM STUDENT AGE: Is 16 years of age, unless accompanied by a parent. **For safety reasons, children under 18 years of age are not permitted in our Reactive Dog Programme.**

HEALTH & VACCINATION STATUS: You cannot come to class if your Dog should happen to pick up fleas or any other parasite or communicable disease. We will hold your attendance in abeyance until your Dog has recovered. The same applies to female dogs in season. **For each of parvo and distemper, we require either a vaccination certificate no older than 3 years or an antibody titer test no older than 1 year.**

REMOVAL FROM CLASS: The Instructor may, at her sole discretion, remove you and your Dog from class if either of you is considered to be a threat of any nature to yourself or any person or animal present, or if you, despite repeatedly being asked not to, continue to use corrections, including, but not limited to, leash corrections, scolding, or shouting at your Dog. **Such actions are counter-productive to the successful outcome of the training,** and it may frighten not only your Dog, but also the other dogs in class, and it offends their owners and the Instructor. *No refund will be given under such circumstances.*

SCHEDULE OF CLASSES & HOMEWORK: The class schedule is available through our website, where it will be updated from time to time – so please check in regularly! Please use the schedule to plan and book your class attendance. Students are expected to **complete homework in between each class** in order to progress to graduation level.

TRAINING EQUIPMENT: Electric shock collars, choke chains, prong collars and any other corrective implements are not conducive to modern dog training and are **EXPRESSLY PROHIBITED** from our classes. If a muzzle has been prescribed for your reactive Dog, this must be worn at all times when at the training centre and surrounding areas. Your Dog will then need to be conditioned to love to wear the muzzle.

LIABILITY WAIVER: The Owner/Handler agrees to indemnify and hold Cowichan Canine Behaviour & Training Ltd and/or Lisbeth Plant and/or any of their employees/agents ("Instructor") harmless from any and all liability for any loss, damage, injury or illness to persons, animals or property. Owner/Handler agrees that Instructor shall not be liable for any loss or damage for any reason unless said loss or damage was a direct and undeniable result of Instructor's negligence. If Dog causes property damage, or bites or injures any other dog, animal or person during or after the term of this Agreement, then the Owner/Handler agrees to defend and indemnify Instructor and Instructor's agents from any resulting claims, demands, lawsuits, losses, costs or expenses, including attorney fees. If Dog is injured in a fight or in any other manner during or after the term of this Agreement, the Owner/Handler assumes the risk and agrees that Instructor should not be held responsible for any resulting injuries, losses, damages, costs or expenses whatsoever.

PANDEMIC WAIVER: Each time the Owner/Handler attends Cowichan Canine's premises, he/she declares him/herself and all other persons accompanies the Owner/Handler to class to be in compliance with Cowichan Canine's from time to time published Health Declaration and Safety Plan regulations (available on <https://cowichancanine.ca>).

VIDEO & PHOTOGRAPHY WAIVER: The Owner/Handler grants Cowichan Canine the permission to obtain and use photographic and video graphic images of the Dog and Owner/Handler during their participation in its programmes and activities.

SCOPE: This Agreement is binding upon the Owner/Handler, and the members of the Owner's/Handler's family and household.

TERMINATION: Cowichan Canine 's duties hereunder shall terminate if (a) in an Instructor's sole judgment Dog is dangerous or vicious to Instructor or any other person or animal, or interferes with the training of other dogs, or (b) the Owner/Handler breaches any term or condition of this Agreement or (c) either party cancels the Agreement. Upon termination in accordance with the foregoing, Instructor's duties shall terminate but all other provisions of this Agreement shall continue in full force and effect.

Welcome to class!!

Signature of owner/handler of Dog

Date

TO BE COMPLETED BY COWICHAN CANINE

| | | | |
|---|---------------------------|--------------------------|--------------------|
| Initial Programme (PSR/Foundation/Reactive/Other) | Attended Orientation Date | Vaccination / Titer Date | |
| Fee: _____ Pymt method: _____ | Online Schedule | Address Book | Client Spreadsheet |
| Date paid: _____ Trans #: _____ | | | |