

**HOWLYNN'S OBEDIENCE TRAINING, LLC
APPLICATION FOR TRAINING**

TRAINER'S NAME _____ DATE _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WK PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

DOG'S NAME _____ BREED _____ AGE _____

VETERINARIAN _____ DATE OF LAST RABIES SHOT _____

HAVE YOU TRAINED A DOG BEFORE? _____ WHERE? _____

HOW DID YOU LEARN OF HOWLYNN'S.? _____

*****PLEASE READ AND SIGN BELOW*****

AGREEMENT TO HOLD HARMLESS, WAIVER AND ASSUMPTION OF RISK

I understand that attendance at a dog obedience class is not without risk to myself, members of my family or guests who may attend, or my dog, because some of the dogs to which we may be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care.

I hereby waive and release Howlynn's Obedience Training, LLC hereinafter referred to as "HOT", its employees, officers, members and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but without any limitation, any injury or damage resulting from the action of any dog. I expressly assume the risk of such damage or injury while attending any training sessions or any other functions of "HOT", or while on the training grounds or the surrounding area thereto.

In consideration of an inducement to the acceptance of my application for training by the Howlynn's Training Classes, I hereby agree to indemnify and hold harmless HOT, its employees, officers, members and agents from any and all claims, or claims by any member of any family or any other person accompanying me to any training session or function of HOT, or while on the grounds or the surrounding area thereto as a result of any action by any dog including my own.

X *Signature* _____ Date _____

DO NOT WRITE BELOW

DATE _____ SESSION _____ PAID _____ CASH/CHECK _____ OBED CGC

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