

# Alaska Dog Sports Application for Training

Class: \_\_\_\_\_ Start Date: \_\_\_\_\_ Time: \_\_\_\_\_

Vaccinations: PARVO/DHL: \_\_\_\_\_ Rabies: \_\_\_\_\_

Owners Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ *(will not be shared with any other organization)*

Dogs Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Dogs Age: \_\_\_\_\_ Male / Female Spayed or Neutered

How long have you had the dog? \_\_\_\_\_ Acquired from: Breeder, Pet Shop, Shelter/Rescue

How did you hear about our program? \_\_\_\_\_

Why did you choose this puppy/dog? \_\_\_\_\_

List the 3 main behaviors you would like to change/improve for your dog:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

How would you describe your dog? (Check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Friendly to dogs or people  | <input type="checkbox"/> Defensive or "Aggressive" |
| <input type="checkbox"/> Nervous with dogs or people | <input type="checkbox"/> Barks and lunges on leash |
| <input type="checkbox"/> Over-excited in new places  | <input type="checkbox"/> Hyperactive               |
| <input type="checkbox"/> Calm & Mellow               | <input type="checkbox"/> Other: _____              |

In consideration of this application and entering the above dog in classes, I hereby agree to hold the owners of this training facility, the instructors and all employees of this facility, Harmless from: 1) Any loss or injury which may accrue to any person, dog or thing and/or which may be caused directly or indirectly to any person or thing by any biting by or to, or by any other acts of the said dog while in or upon the premises or grounds, or in at or near any entrances or exits thereto, whether or not and when the said dog is being delivered, removed, or otherwise handled, and to personally assume full responsibility and liability therefore, (2) the disappearance and/or loss of property by theft or otherwise, and/or damage caused by the negligence or carelessness of the said landlord, instructors or any other persons, and/or by any other cause(s) directly or indirectly occurring while such person(s) and/or dog is on training premises, and (3) Any physical injury caused to applicant while on the training premises by any cause.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date