

A Family Dog Class Registration
Cost \$60.00
P. O. Box 1643
Bonnerr Ferry, ID 83805

Your Name _____

Your Dog's Name _____

Breed/Mix? _____ Age? _____

Address _____

Phone _____

Phone _____

E-Mail _____

Harm/Release

We/I the undersigned do consent to training with the understanding that all measures will be taken to ensure the health and well being of my/our dog.

We/I understand that with respect to all measures of care and safety being taken by owners/assistants of A Family Dog that in the event of injury or harm, I do hereby release said owners/assistance from responsibility and/or liability.

Signed

Dated: _____