

Application for Training



Cher Car Kennels LLC

Owner Name (printed)	How long have you owned this dog?	Date	
Dog's Name	Breed of Dog	Dog's Age	Dog's Sex
Veterinarian Name (printed)	Located at (Animal Hospital or Clinic name)		

Agreement to HOLD HARMLESS, WAIVER and ASSUMPTION of RISK

I understand that attendance of 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 I will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care. I state that both my dog and myself and all members of my family who take these classes are both mentally and physically able to withstand the rigors of this training.

I hereby waive and release Cher Car Kennels LLC hereinafter referred to as the "Training Organization", its employees, officers, members, clients 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 limitation, any injury or damage resulting from any action of any dog, and I expressly assume the risk of such damage or injury or damage resulting from the action of any dog, and I expressly assume the risk of such damage or injury while attending any training session, or any other function of the Cher Car Kennels LLC Training Organization, or while on the training grounds or the surrounding area thereto including, but not limited to, 4215 S. Lowell Road, 4219 S. Lowell Road, 4219 1/2 S. Lowell Road and 4305 S. Lowell Road in Saint Johns, Michigan.

In consideration of and as inducement to the acceptance of my application for training membership by the Cher Car Kennels LLC Training Organization, I hereby agree to indemnify and hold harmless this Training Organization, its employees, officers, members, clients and agents from any and all claims, or claim made by any member of any family or any other person accompanying me to any training session or function of the Training Organization, or while on grounds or the surrounding area thereto as a result of any action by any dog, including my own.

I certify the accuracy of all information given about dog and specifically represents that I am the sole owner, and acknowledge sole responsible for any and all acts or behavior of my dog. My dog is up to date on vaccinations for Rabies, DHL and Parvo. If taking protection class, I understand that the class is not for the purpose of attack work, but rather stresses situation aggression training. I understand that once my dog is exposed to protection training, he/she may be quicker to respond in any given situation, and that I must and WILL make provisions for this.

I, the undersigned, have read, understand and agree to ALL CONDITIONS detailed above

Owner Name (printed)	Owner Signature	Date
Owner Address	City, State, Zip	
Home phone	Cell phone	E-mail address