



NAME	E-MAIL (Please write e-mail address <i>very</i> clearly)	
STREET ADDRESS		
CITY	STATE	ZIP
HOME PHONE (EVENINGS)		WORK PHONE (DAYS)

**From whom did you learn about Gary and Kathy's Innovative Dog Training?**

Have you ever owned a dog before?  Yes  No

How old was the dog that you wish to enroll when you got him? \_\_\_\_\_

Have you ever trained a dog before?  Yes  No

Please specify breed of dog previously trained \_\_\_\_\_

When (year) \_\_\_\_\_ Where (what city) \_\_\_\_\_

Name of training organization \_\_\_\_\_

Have you shown a dog in obedience, rally or agility competition?  Yes  No

If "yes," what is the highest title that you have obtained? \_\_\_\_\_

Do you intend to show this dog in obedience trials?  Yes  No  Don't Know

If "yes," to what title(s)? \_\_\_\_\_

*Briefly state what you hope to accomplish from this class.*

### INFORMATION ABOUT YOUR DOG

Breed \_\_\_\_\_

Age \_\_\_\_\_  M  F

Call Name \_\_\_\_\_

Last Vaccination Date (Required)

Rabies \_\_\_\_\_

Registered Name (If Applicable) \_\_\_\_\_

DHLP \_\_\_\_\_

Parvo \_\_\_\_\_

Veterinarian \_\_\_\_\_

*You May Also Want to Vaccinate for*

**Bordetella (Kennel Cough) and**

**Leptospirosis (depending on age)**

Has your dog been spayed or neutered?  Yes  No  Not Apply because puppy is too young.

Has your dog ever bitten or demonstrated aggression towards people?  Yes\*  No

\*If "Yes", you *must* discuss aggression with Gary or Kathy. We cannot accept truly aggressive dogs in class.

<p><i>Registration Fees (sales tax is included)</i></p> <p><b>Beginners: \$155</b></p> <p>Advanced I: \$145</p> <p>Advanced II: \$135</p> <p>Advanced III: \$125</p> <p>Advanced IV: \$115</p>	<p><i>The registration fee is payable in advance.</i></p> <p>You will be notified by mail confirming your enrollment about one week before classes start.</p> <p>Classes are held at 12002 S. 84th Street.</p> <p>This is <math>\frac{1}{10}</math> of a mile south of Highway 370 on the west side of 84th Street.</p>
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### Agreement to Hold Harmless, Waiver, and Assumption of Risk

I understand that attending dog obedience training classes is not without risk to me, members of my family or guests who may attend, or my dog. 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 will be asked to back up (move backwards) to encourage my dog to come to me. I understand that backing up, and otherwise moving about with my dog, presents an increased risk of a fall and resultant injury to me or to my dog.

I hereby release *Innovative Training* hereinafter referred to as the "Training Organization," its employees, officers, members, and agents from any and all liability of any nature, for injury or damage that I or my dog may suffer. Specifically, this includes, but without limitation, any injury or damage resulting from the action of any dog. I understand that I expressly assume the risk of such damage or injury while attending any training session, currently or in the future, or any other function of the Training Organization, or while on the training grounds or the surrounding area thereto. The above also includes potential injuries sustained due to falling down.

In consideration of and as inducement to the acceptance of my application for training membership by this Training Organization, I hereby agree to indemnify and hold harmless the Training Organization, its employees, officers, members, agents and helpers from any and all claims. This includes claims by any member of any family or any other person accompanying me to any training session or function to the Training Organization, or while on the grounds or the surrounding area thereto as a result of any action of any dog, including my own. I also acknowledge that I have read and agree to abide by the "Training Rules" as stated below.

**Signature** of Owner or Authorized Agent (below). Note: a parent or guardian must sign for a minor (under age 18).

\_\_\_\_\_ **Date** \_\_\_\_\_

**Name of Owner** (if different from above) \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

*AS A CONDITION TO ACCEPTANCE, THIS AGREEMENT MUST BE SIGNED ABOVE*

### TRAINING RULES

1. One person only will be allowed to train each dog during classes. The same trainer must train the same dog throughout the entire class session. The trainer must be at least 14 years old.
2. An adult must accompany trainers under the age of 16 to every class. Young teens (14 and 15) wishing to enroll must apply for pre-authorized approval (call before classes begin) to enroll.
3. Correct training equipment is *required* for each dog: a properly fitted training collar and a 4-foot *leather leash*. A variety of collars and leashes will be available to purchase at class if needed.
4. At the discretion of the instructors, a dog may be expelled from class if he demonstrates aggressive behavior or continually retards the progress of other class members.
5. No mistreatment of dogs will be tolerated.
6. Unless specified, all dogs *must* remain on-leash while in the building or on the premises.
7. Children accompanying an adult to class must remain in the building and remain seated throughout the class.

**CLASSES ARE FILLED ON A FIRST-COME, FIRST-SERVED BASIS.**

WE CANNOT PREDICT HOW QUICKLY CLASSES WILL FILL. WE THEREFORE  
RECOMMEND RETURNING YOUR APPLICATION AND FEE AS QUICKLY AS POSSIBLE.

*We will not cash your check until approximately 1 week before the start of your class session.*

**Please indicate your preference for date of class session under "Date Preferred" below.**

<u>Date Preferred</u>	<u>START DATE</u>	<u>TIME</u>	<u>CLASS</u>
<input type="checkbox"/>	3/6/12	6:45 to 8:15 PM	Tuesday Beginners
<input type="checkbox"/>	8/28/12	6:45 to 8:15 PM	Tuesday Beginners

*Return this fully completed application with a check payable to Innovative Training to:*



**Innovative Training**  
c/o Gary & Kathy Platt  
PO Box 461126  
Papillion, NE 68046

**by: February 25<sup>th</sup> or August 18<sup>th</sup>**  
(After these above dates, please email or call  
to confirm availability of class openings.)

You will receive confirmation of enrollment (email or U.S. mail) approximately one week before class starts.

Questions? Contact Gary or Kathy (email preferred) [creativet@novia.net](mailto:creativet@novia.net) or call 402-593-9065. *Thank you!*