

Venita's Training Services Class Enrollment Form

(Complete and mail to: Venita's Training Services, P.O. Box 262, Belleville, MI 48112)

Make checks payable to: Venita's Training Services

Owners Name: _____

Address: _____ City _____ Zip Code _____

Home Phone Number: _____ Cell Phone _____

E-mail: _____

Pet's Name: _____ Breed _____ Age _____

Sex: _____ Neutered: Yes / No

Please choose your class (include date):

Puppy _____ Level 1-Older puppy or dog _____ Level 2- Int/CGC _____

Agility 1 or 2 _____ Rally-O 1 or 2 _____ Kitten Kindergarten _____

Level 3- Outdoor Adventures _____ Clicker Trick Training 1 or 2 _____

CGC Test _____ The Nose Knows 1 or 2 _____ Nose Knows Odor 1 or 2 _____

Reactive Rover Rehab _____ Reactive Rover Agility _____

How did you hear about our program? _____

I understand and agree that attendance at pet training class is not without risk to myself, members of my family, guests or my dog/cat, because some pets to which we may be exposed may be difficult to control and may be the cause of injury, even when handled with the greatest care.

I hereby waive any and all rights of claim for damages arising from injuries received while involved with training sessions or activities at Regency Kennels and release Regency Kennels & Venita's Training Services, it's employees, officers, volunteers, trainers and agents from any liability of any nature, for injury or loss which I, my family, guests or pet may suffer.

Signature: _____ Date: _____

Class sizes are limited and are filled on a first paid basis. To reserve a spot in class, please fill out enrollment form and return with payment at least 2 days prior to the start of class. You will receive confirmation via e-mail or telephone. Please bring proof of vaccination to the first class session or mail with your enrollment form.

NO REFUNDS after the 1STCLASS.