Big Times Kennel Canine Training Center

Name			
Address			
Email Address			_
(Class confirmations are sent out by	email from Big	<u>TimesClass</u>	es@gmail.com)
Contact Number			_
Dog's Name			
Dog's Breed	Age	Sex	
Class Selection Start Date	Class Time	e	
I understand that the attendance at dog training of guests who may attend or to my dog(s), because a control and may be the cause of injury even when I agree to hold the instructors, training center fact which may be alleged to have been caused direct while in or upon the property, and I personally as further agree to hold the aforementioned party (if whether such injury be caused or alleged to be caused in any other person or any other cause this and any subsequent classes I attend.	some of the dogs to we handled with the graph of the grap	which I will be exteatest amount of the commers harmly person or thing ity and liability following for damages of the aforementices.	sposed may be difficult to of care. less for any loss or injury g by the act of my dog for any such claim; I ge or injury to my dog ioned party(ies),or by the
There will be no refunds after the 1st class done in the case that the regularly schedu We look forward to working with you and	led class could not		akeup classes are only
*	*	_	
Signature of owner or authorized agent		Date	

Make Checks Payable to BIG TIMES KENNEL Return application with payment to: Big Times Kennel 10650 Clyo Road Centerville Ohio 45458