

# Big Times Kennel Canine Training Center

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email Address \_\_\_\_\_

**(Class confirmations are sent out by email from BigTimesClasses@gmail.com)**

Contact Number \_\_\_\_\_

Dog's Name \_\_\_\_\_

Dog's Breed \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Class Selection \_\_\_\_\_ Start Date \_\_\_\_\_ Class Time \_\_\_\_\_

I understand that the attendance at dog training class is not without risk to myself and members of my family or guests who may attend or to my dog(s), 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 agree to hold the instructors, training center facility owners and other owners harmless for any loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of my dog while in or upon the property, and I personally assume all responsibility and liability for any such claim; I further agree to hold the aforementioned party (ies) harmless for any claim for damage or injury to my dog whether such injury be caused or alleged to be caused by negligence of the aforementioned party(ies), or by the negligence of any other person or any other cause or causes. I further agree that this agreement is binding for this and any subsequent classes I attend.

**There will be no refunds after the 1st class of the session is completed. Makeup classes are only done in the case that the regularly scheduled class could not be held.**

**We look forward to working with you and your dog.**

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\_\_\_\_\_  
Signature of owner or authorized agent

\_\_\_\_\_  
Date

**Make Checks Payable to BIG TIMES KENNEL**

**Return application with payment to:**

**Big Times Kennel 10650 Clys Road Centerville Ohio 45458**