

RESPONSIBLE ANIMAL OWNERS OF TENNESSEE, INC. (RAOT)
REGISTRATION FORM FOR DOG TRAINING CLASSES - Revised 01/12/10

Please Print:

Name:	Referred by:
	Dog's Name:
Address:	Breed:
	Color:
Home phone:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Spayed/Neutered?
Work phone:	Age:
EMAIL:	Vet:

I understand and agree, by my signature hereto, that:

(1) By enrolling my dog in training classes, I acknowledge that the training process is dependant on my level of participation. I agree to work with my dog as directed and to practice assigned commands and exercises daily.

(2) I hereby release, indemnify and hold harmless, Responsible Animal Owners of Tennessee, Inc., Hollywood PetStar, property owners, and/or any and all of their representatives, including volunteers, involved in the training process, from any and all liability and/or damages whatsoever arising out of or in connection with any injury or illness whether mental, emotional, or physical, from any cause whatsoever, including death and/or property damage sustained by me, my family, guest(s) that I may bring to class with me, and/or my animal(s) that may arise as a result of or in connection with any and all training classes sponsored by Responsible Animal Owners of Tennessee, Inc.

(3) There is no refund of tuition or fees after you register and this contract is non-transferrable.

(4) I agree to abide by the class rules and my instructors' recommendations.

(5) RESPONSIBLE ANIMAL OWNERS OF TENNESSEE, INC. reserves the right to cancel and reschedule classes as necessary. If there is any question whether or not a class will take place, please check the bottom of the registration page.

Dog training classes are a fund-raising project of Responsible Animal Owners of Tennessee, Inc. Trainers may accept certified checks, money orders or cash, we do not accept credit cards or personal checks. I certify that I have read and agree to the above terms by my signature below:

Please sign:

Owner: X _____ **Date:** X _____

----- DO NOT WRITE BELOW THIS LINE! -----

Instructors: Donna Malone & Jeanne Guarr	Circle one: BASIC ADVANCED
	Class location: BROAD
Shot records checked? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NEED	Starting date: _____
Follow-up needed? <input type="checkbox"/> YES <input type="checkbox"/> NO	Starting time: 10:00 A.M.
Notes:	<input type="checkbox"/> Certified Check or Money Order
	<input type="checkbox"/> Cash
	<input type="checkbox"/> Pro Bono/Discount
	<input type="checkbox"/> Check if ONLY clicker sold
	TOTAL AMOUNT: \$ _____

	1	2	3	4	5	6
WEEK						

EXERCISES ACCOMPLISHED:

- Sit Down Stand Stay Come Heel
 Sit Pretty Shake High Five Crawl Play Dead Roll Over

GRADUATED INCOMPLETE

RECEIPT - Detach and give to student.

RAOT, Inc., acknowledges receipt of \$ _____ from _____, for six dog training classes.

INSTRUCTOR: DONNA MALONE

DATE: _____