



Therapy Dog Preparation Classes

Super Dog Heroes Make People Smile!

www.dogjazz.com
507 West 47th
San Angelo, Texas 76903

For Office Use:	
Class Date:	_____
<input type="checkbox"/> Paid online	
<input type="checkbox"/> Paid in person	
Balance Due:	_____

Dog Owner's Full Name		
Mailing Address		
City	State	Zip
Email Address		
Cell Phone:	Other:	

Dog's Full Name		
Breed:		
Approximate Weight:	AKC, PAL, Canine Partners #?	Spayed/Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Birth:	Age	Sex
Current on Vaccinations? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Soon	I am interested in the AKC Therapy Dog Title: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Need More Information	

Previous Training or Experience
Why do you feel that your dog would make a good therapy dog?
After credentials as a Therapy Dog, what plans do you have for your dog's work in the community?



In consideration of and as inducement to the acceptance of my application, I expressly assume the risk while at 507 West 47th Street, San Angelo, Texas, or other training locations, including specifically but not without limitation, any injury or damages resulting from the action of my dog. I hereby agree to indemnify and hold harmless Valerie Tillery, guest instructors and assistants from any and all claims or claims by members of my family as a result of any action by any dog, including my own actions. I understand that the instructor and delegated assistant have the right to refuse admittance or evict any aggressive dog at their discretion.

Registration fees for the classes are non-refundable once classes begin, yet can be transferred to the next block of classes in the event situations arise. Testing is free of charge.



Sign: _____ Date: _____

