



Training Class Enrollment Form

Please complete and email to rightontrackk9@gmail.com, or mail to:
6136 Weed Road, Plymouth, MI 48170

Classes can be paid for by cash or checks made payable to: Elvira Price

Dog Owner's Name: _____

Address: _____ City: _____

Zip Code: _____

Phone Number: _____ Email: _____

Dog's Name: _____ Breed _____ Age _____

Sex: _____ Neutered: Yes / No

Select the class of your choice (include start date of the class):

Socialization and Basic Skills for your puppy _____

Basic Obedience 1 (Beginner) Class _____

Basic Obedience 2 (Advanced) Class _____

Nosework _____

How did you hear about our classes? _____

I understand and agree that attendance at dog obedience training class is not without risk to myself, members of my family, guests or my dog, because some dogs to which we may be exposed to 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 and activities at **Right on Track K9 Training LLC** sessions. I agree to release **Right on Track K9 Training**, its employees, officers, members, trainers and agents from any liability of any nature, for injury or loss which I, my family, guests or dog may suffer.

Signature _____ Date: _____

Class sizes are limited and are filled on a first paid basis. To reserve a spot in a class, please fill out this registration and return it with payment at least 5 days prior to the start date of class. You will receive confirmation via e-mail or a telephone call.

Please bring proof of vaccinations including Bordetella to first night of class or send a copy along with this registration form.

NO REFUNDS AFTER THE FIRST NIGHT OF CLASS.

For office use only:

Amount Paid_____ Payment Method_____ Received by_____