

Plummer Park, West Hollywood
Basic Obedience Dog Training Class / Puppy Kindergarten Class
REGISTRATION FORM – WAIVER AND RELEASE

Classes are not designed to accommodate dogs with serious behavior issues or aggression

I wish to enroll my dog in the

- **Puppy Kindergarten** class on Saturdays from 9:00 am to 10:00 am, beginning on date _____ for 6 lessons. The first class is for owners only, without their pups. I attest that my dog is between the ages of 8 weeks and 18 weeks. **Cost is \$125.**
- **Basic Obedience** class on Saturdays from 10:15 am to 11:15 am, beginning on date _____ for 6 lessons. The first class is for owners only, without their dogs. I attest that my dog is at least 20 weeks old. **Cost is \$125.**

The applicable fee is payable in advance. Your spot in class cannot be confirmed until the printed registration form and payment are received. Please mail this form with a check or money order payable to: City of West Hollywood, Recreation Services Dept., 8300 Santa Monica Blvd., West Hollywood, CA 90069. You may also drop off the form and payment at the Plummer Park office. No cash will be accepted. NO REFUNDS will be accepted after the first class. To obtain a full refund, you must notify the Recreation Division in writing.

I voluntarily agree to participate, or for my child/children to participate, in this program. I realize every precaution is taken to eliminate any injuries or hazards and a competent supervisor is present. However, in the event of any injury to myself and/or child, I hereby release and hold harmless from any liability for damages or claims for damages for personal injury, including accidental death, as well as from claims for property damage which may arise in connection with the above named activity, against the Supervisor, City of West Hollywood, Recreation Services Division and its personnel. Participants permit the taking of photographs of themselves by the City of West Hollywood during recreation classes to be used at the City's discretion.

As parent/guardian, I hereby consent to treatment of my minor child for any and all medical procedures deemed necessary as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment.

I have read and understand the refund policy.

I understand that the behavior of domestic animals is sometimes unpredictable and that some domestic animals are capable of inflicting serious personal injury or death, as well as extensive property damage. Knowing the risks of handling domestic animals, I agree to assume those risks and to maintain control of any dog in my care and custody while attending training class. I will show written proof at the first class that my dog's vaccinations are current and will remain so for the duration of this course.

If, in the opinion of the Supervisor, the handler is unable to adequately train or control the dog or the dog is unduly aggressive, the handler agrees to withdraw from the class. The Supervisor may make such determination at any time. The owner may be referred to private training until the dog is able to handle a group class situation. The Supervisor reserves the right to excuse from class any person who, in the Supervisor's opinion, is abusing the dog.

PLEASE PRINT CLEARLY

Owner's name _____ Day Phone _____ Eve. Phone _____

Handler's name _____ Age if under 18 _____

Address _____ City _____ State _____ Zip _____

Email _____ Dog's name _____ Breed _____ Sex _____ Age _____

Is dog spayed or neutered? _____ Where did you learn about the class? _____

Parent or adult guardian if owner/handler is under 18 _____

Owner's Signature

Date