

Puppy Pre-School

Owner's Name: _____

Street Address: _____

City/State/Zip: _____ Email: _____

Phone Number: (Home) _____ (Cell) _____ (Work) _____

Puppy's Name: _____ Sex: _____

Age Today: _____ Date of Birth: _____

Breed: _____ Purchase Date: _____

Where did you purchase or get your puppy from? _____

Veterinarian: _____ Phone: _____

How did you hear about ColumbusK9? _____

What you should know:

- Your puppy should be at least 8 -16weeks of age at the beginning of the course.
- Before attending we advise that your puppy be settled at home with you for at least 10-14 days before starting Puppy Pre-School.
- Your puppy should be healthy and must have had at least the first round of vaccinations one week prior to the start of class. We do require that you bring or mail in proof of vaccinations (shot record) signed by your licensed veterinarian.
- We recommend that the whole family take a part in class, but please no children under the age of 5.
- If you need to miss a class for any reason, please contact us at 614-850-4659.

Owner's Signature _____ Date _____

Mail Payment (\$45) and Registration to:

Start Date: _____

Columbus K9 LLC
5119 Cemetery Rd
Hilliard OH 43026

FOR OFFICE USE ONLY

Funds Rcvd: Cash _____ Check _____ Other _____ Today's Date: _____
Amt Paid: _____ Initials: _____

Vaccination Record Presented to: _____
DHLP _____ Parvo _____ CV _____ Bord _____ Rabies _____

Private Consultation Date _____ Program Start Date: _____ Attendance: 1 / 2 / 3

“JOIN THE PACK”



Marlo Schmidt
Certified Professional Dog Trainer
Member IACP, NK9DTA
PH: 614-325-3461
Email: marlo@columbusk9.com

5119 Cemetery Rd / Hilliard OH / 43026

Holly Jackson
Certified Professional Dog Trainer
Member IACP, NK9DTA
PH: 614-579-1343
Email: holly@columbusk9.com

Waiver of Claims, Assumption of Risk and Acceptance of Financial Responsibility Agreement

I (undersigned below) hereby acknowledge that I have voluntarily applied for dog owner/handler training offered by Columbus K9 LLC. I understand that classes or training offered by Columbus K9 LLC can expose participants (owner and dog) to certain related risks such as but not limited to; being bitten by a dog, scratched, knocked down, jumped on, frightened or otherwise injured by their own dog or other dogs in class, and/or risks related to the premises or equipment used during training. I assume all such risks, both expressed and implied.

Columbus K9 LLC does not warrant the behavior or temperament or any of the dogs or owners participating in training. By signing below I assume all risks and hereby release Columbus K9 LLC from all responsibility in case of injury, death, loss or damage to myself or my dog. Columbus K9 LLC will not be responsible for any negligence on my part and I will accept responsibility for my own actions as stated by Ohio laws.

Should it be necessary for Columbus K9 LLC to enforce this waiver agreement I will pay all fees or costs relating to such enforcement.

I also understand that by participating in training I am not guaranteed the performance or behavior of my dog(s) or other dogs under any circumstances, and information and instruction that is provided strictly as guidelines as Columbus K9 LLC can not predict the behavior or obedience of my dog in the future.

I further agree to hold harmless Columbus K9 LLC from claims, suits, or any other such actions resulting from the damages, losses, injuries or death caused by my dog(s) or by me personally or my minor children.

Signed (Guardian's signature if under 18 years of age)

Date