

Elm Point Animal Hospital

Dog Training Program

Waiver and Agreement Form

I understand that participation in Elm Point Animal Hospital Training Program which include; Group Classes, private sessions, seminars and special events are not without some risk. By signing hereunder, I certify that I have been informed and understand that there is always some unavoidable risk of injury involved when working with animals, especially animals with behavioral issues. I acknowledge that dogs can be inherently difficult to control and that not all dogs will be under control at all times resulting in the possibility of injury to me, my dog, my family members, or third parties. By signing below, I assume any and all risks that may occur by my participation in the Elm Point Animal Hospital Training Program. I hereby waive the responsibilities and release Elm Point Animal Hospital, its employees, and affiliates from any claims which may occur on Elm Point Animal Hospital property or surrounding areas resulting from participation in Elm Point Animal Hospital Dog Training Program. I agree to assume fees/medical expenses related to any injury or damage resulting from or caused by the action of my dog(s).

Sign: _____ Date: _____

Print Name: _____

(If a minor, a parent or legal guardian must sign)