BOARDING INFORMATION

PLEASE INCLUDE IN KENNEL CHECKLIST



So is our approach to training.

We know dogs.

Owner Name:						
Street Address:						
City/State/Zip:						
Email:						
Home Phone:		(Cell Phone:			
Emergency Phone if owner canno	t be contacted:					
Dog's Name:		I	Breed:		<i>I</i>	Age:
How did you get your dog?						
Prior programs at Extreme K-9: □	Residency Be	oarding 🗆 G	Group Obedience 🗆 E-C	Collar 🗆 Pr	rivate Lessons	
Previous Training:						
Referred by:						
Medical Records: ☐ Rabies ☐	Bordetella 🗆 Norma	l Vaccinations 🏻 🖡	ALL SHOTS MUST BE C	URRENT		
Sex: ☐ Male ☐ Female ☐ Spay	ed or Neutered					
OFFICE USE ONLY	Am	ount quoted:		Payment:	□ Cash □ Check#	
	Am	ount paid:				
Length of stay:			Notes:			
Start Date:	Time:					
End Date:	Time:					
Food:						
Vet:						
Vet Phone:						
Medications:						



CLIENT LIABILITY RELEASE



, recognize that working with canines may potentially pose a physical risk and I fully acknowledge and assume	I, _
at risk. Although EXTREME K-9 has taken all reasonable measures to protect me and my canine(s) from accidents and injuries associated with my	that
rticipation in its training programs, the risk of injury may still occur. Therefore, being fully apprised of the inherent risks involved in working with canines,	pari
ereby completely release and hold harmless EXTREME K-9 from any and all claims and/or causes of action that I may have relating to or arising from any	I he
ury or damage that I, my canine(s) or any of my personal property should sustain while in participation with EXTREME K-9 training programs or while	inju
EXTREME K-9 property or the owners, lessees or renters of any property where training classes may be conducted. I further agree to hold harmless any	on l
structor, employee, volunteer, agent, or independent contractor, working with or on behalf of EXTREME K-9 as well as any other participants involved in	inst
ining programs with EXTREME K-9.	trai

Although EXTREME K-9 has a proven method and record of its training techniques, no assurances or guarantees are made as to the level and extent your canine will adapt and adhere to behavior modifications, training responsiveness and retention. Results depend on the temperament of the dog and accuracy, continuity and consistency of training reinforcement.

As a client, I understand and agree to adhere to the policies and procedures of EXTREME K-9 and its training methods and protocols. I understand that the EXTREME K-9 program recommends continued education and training sessions to reinforce the behavior modification training techniques. I understand that as part of the success of EXTREME K-9's program is based upon the owner or primary caregiver continuing with ongoing training lessons for a period of time beyond the initial sessions. I further understand that my training sessions may be terminated for any reason including, but not limited to, a violation of any EXTREME K-9 policy or procedure.

This Release terminates all prior agreements, written or oral, between EXTREME K-9 and me. I acknowledge that no prior representations made whether written or oral, subsequent to the Release will alter the terms and conditions of this Release.

If any provision or portion thereof, set forth herein are deemed by a court or other appropriate tribunal having competent jurisdiction, to be unenforceable or unreasonable as to scope, activity, territory, or duration or in any other respect, then such court or tribunal may modify such unreasonable or unenforceable provision or any portion thereof, as said court or tribunal deems necessary and the unaffected provisions herein shall remain in full force and binding on the parties.

CLIENTS ARE NOT TO APPROACH, TOUCH AND/OR PROVOKE ANY ANIMAL ON THE PREMISES OF EXTREME K-9. CLIENTS ARE RESTRICTED FROM INTERACTION WITH ANY ANIMAL UNLESS ANIMAL AND CLIENT ARE UNDER DIRECT GUIDANCE OF AN EXTREME K-9 CERTIFIED TRAINER.

Date
Date
ease, I understand its contents and I have made my child aware of its content