

**PET-AGREE, INC. CANINE TRAINING SCHOOL**  
**Humane Training for Dogs and Their People**  
12 Donovan Road, Candia NH 03034  
(603) 483-8775

**AGILITY REGISTRATION FORM**

Today's Date: \_\_\_\_\_  
Enrolling in Class: \_\_\_\_\_ Start Date for Class: \_\_\_\_\_  
Name of Person \_\_\_\_\_  
Address: Street \_\_\_\_\_  
Town: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Ext. \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Do you have any hearing or other physical challenges? \_\_\_\_\_

\*\*\*\*\*

**WAIVER, ASSUMPTION OF RISK AND AGREEMENT TO HOLD HARMLESS**

I understand that attendance of a canine training class is not without risk to myself, members of my family or guests who may attend, or my dog, due to some of the dogs to which I (we) will be exposed may be difficult to control and may be the cause of injury even when handled with the utmost of care.

I hereby waive and release Pet-Agree Inc. Canine Training School, its owner and agents from any and all liability of any nature, for injury and or damage resulting from the action of any dog. I assume the risk of any damage or injury while attending any training session or other function for the School, or while on the training grounds or the surrounding area.

In consideration of and as inducement to the acceptance of my application for membership in this training class, I hereby agree to indemnify and hold harmless this School, its owners and agents from any and all claims by any member of my family or other person accompanying me to any session or function of the School or while on the grounds or the surrounding area there to as a result of any action by any dog, including my own.

- My dog(s) inoculation records are current and already on file with you.
- My dog(s) inoculation records are attached.
- I have contacted our veterinarian on \_\_\_/\_\_\_/\_\_\_ to fax Pet-Agree a copy of our dog's most recent inoculation record. **603-483-8770**

Signature of Owner or Authorized Agent:

\_\_\_\_\_ Date: \_\_\_\_\_

## DOG PROFILE

1. Dog's Call Name: \_\_\_\_\_
2. Breed(s): \_\_\_\_\_
3. Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: \_\_\_\_\_
4. Has the dog been spayed or neutered? \_\_\_\_\_
5. Are you the primary owner of the dog? If not, what is your relationship to this dog? \_\_\_\_\_  
\_\_\_\_\_
6. How long have you owned this dog? \_\_\_\_\_
7. Do you own other dogs? If so, how many? \_\_\_\_\_
8. Where did you obtain this dog?  
 Ad in Paper     Breeder     Friend or Relative     Pet Store     Stray  
 Shelter     Rescue Agency     Other: \_\_\_\_\_
9. Name of Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_
10. When was this dog last seen by a veterinarian? \_\_\_\_\_
11. Is this dog on any medication? What and why? \_\_\_\_\_
12. Where is this dog kept?  
 In house loose     In house crated     In fenced yard  
 In dog kennel     Tied outside     Other: \_\_\_\_\_
13. Has this dog ever bitten anyone? YES / NO If YES, please describe when this happened and the circumstances:  
\_\_\_\_\_  
\_\_\_\_\_
14. Has this dog ever been in a fight with another dog? If so please describe how many times this has happened and the circumstances:  
\_\_\_\_\_  
\_\_\_\_\_
15. How does this dog react to:  
Men? \_\_\_\_\_  
Women? \_\_\_\_\_  
Children? \_\_\_\_\_  
Strangers? \_\_\_\_\_  
Crowds? \_\_\_\_\_  
Other adult dogs? \_\_\_\_\_  
Puppies? \_\_\_\_\_  
Horses? \_\_\_\_\_
16. What things upset this dog? \_\_\_\_\_
17. How does this dog react to riding in a car? \_\_\_\_\_
18. How does this dog react to being left alone? \_\_\_\_\_
19. How would you describe this dog's personality? Check all that apply:  
 Shy     Friendly     Fearful     Happy     Aggressive  
 Playful     Nervous     Bored     Hyperactive     Loud  
 Annoying     Calm     Jealous     Submissive     Territorial  
 Finicky     Indifferent     Dominant     Extroverted     Dependent
20. What bad habits does your dog have? Check all that apply:  
 Barks/Howls     Digs     Chews     Growls     Runs away

- Jumps up       Gets in trash       Chases things       Bites       Wets  
 Begs       Other: \_\_\_\_\_
- 

20. What commands does your dog respond to? Check all that apply:

- Come       Don't jump       Down       Drop it       Enough  
 Fetch       Give       Heel       Hup/Jump       Leave it  
 Let's go       OK       Sit       Stand       Stay  
 Stop it       Take it       Wait       Others \_\_\_\_\_
- 

21. How often will your dog come when called?

- 100%       75%       50%       25%       0%

22. Has this dog had prior agility training? If so, what level, where and where? \_\_\_\_\_

---

23. List activities enjoyed by you and your dog: \_\_\_\_\_

---

24. List titles earned by your dog: \_\_\_\_\_

---

25. List future goals you have for yourself and your dog: \_\_\_\_\_

---