

# CAPITOL CANINE SERVICES



obedience training, behavior modification, law enforcement,  
protection, photography, consultation & much more  
21220 New Hampshire Ave. Brookeville, MD 20833  
(301) 260-BARK [2275], fax (240) 252-5919  
email: [dogs@capitolk9.com](mailto:dogs@capitolk9.com)  
<http://capitolk9.com>

\*\*\*Please fill out this form as completely as possible, print it, using the button above, sign it and bring it to the first class. If you choose to submit the form by e-mail, a digital signature is required. When e-mailing; be sure to print or save a copy then click submit\*\*\*

## Training Application

Class:  Start Date:  Start Time:

### Handler Information

First Name:  Last Name:   
Street Address:  Apt:   
City:  State:  Zip Code:   
Home Phone:  Work Phone:  Ext:   
Cell Phone:  Other Phone:   
email address:

Where or from whom did you here about us?

What do you hope to accomplish with your dog?

### Dog Information

Name:   
Breed:   
Color:  Age:   
 Spayed Female  Neutered Male  
 Intact Female  Intact Male

#### Vaccination Expiration Dates

Rabies:  DHLPPV:

Veterinarian:

### Payment

Cash  Credit Card  
 Check  Other

Discount Code:

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

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

*I hereby waive and release Capitol Canine Services hereinafter referred to as the "Training Organization", its employees, officers, members, and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but without limitation, any injury or damage resulting from the action of any dog, and I expressly assume the risk of such damage or injury while attending any training session, or any function, of the Training Organization, or while on the training grounds or the surrounding area thereto.*

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

Signed By \_\_\_\_\_

Date: