



5747 Red Alder Dr. NE
Olympia, WA 98516-2142

Voice: 360-493-2586

FAX: 360-455-1318

HumanAnimalSolutions@comcast.net

www.HumanAnimalSolutions.com

Intermediate Therapy Dog Training Class Registration

Owner's Name:	Dog's Name:
Address:	Breed/Type:
	Dog's Age:
Primary Phone:	Secondary Phone:
E-Mail:	
We currently visit at this location:	
We find these skills to be helpful during visiting:	
Something I want you to know about me or my dog is:	
I have done clicker training before: <input type="checkbox"/> No <input type="checkbox"/> Yes – Please tell me where you learned and how you use(d) it:	

I wish to register for the Intermediate Therapy Dog Training class. I understand that payment of \$110 is due in advance and that I must show proof of rabies vaccination.

I indemnify and hold Human-Animal Solutions, facility owner(s), instructor(s), and assistant(s), harmless from and against all claims, losses, liabilities, and damage to persons or property, governmental charges or fines, and attorneys' fees arising out of the acts or omissions of dog training lessons or behavior consultation including but not limited to interactions with instructor, assistants, students, or animals, or demonstrations involving my dog.

Signature: _____

Date: _____

Please make check payable to Ann Howie.

Please return completed form with payment to Ann Howie, 5747 Red Alder Dr. NE, Olympia, WA 98516.