



**High Point K9 Center**  
**Class Registration Form**  
 Enroll Early / Class sizes limited

**Note: Please ensure you have met the class pre-requisites for the class you are registering for.**

**Class Information:**

Name of Class:	Instructor:
Day of Class:	Time of Class:

**Handler Information:**

Name:	
Address:	
Home Phone:	Cell Phone:
Email (Please Print Clearly)	

**Dog Information:**

Dog's Name:	
Dog's Breed:	
Dog's Gender:	Dog's Age: _____ Yrs _____ Months
Has your dog ever bitten a Human? Y / N	Another Dog? Y / N
If Yes Please Explain:	
For Agility Classes:	Dog's Jump Height:
	Dog's Competition Level:

**Payment Information:**

Please send a check (see web site for class cost) payable to "High Point K9 Center" along with this form to the registrar. Please submit a separate registration form and check for each dog being registered, as well as each class you are registering for. Please see session schedule for the registrar's contact information for this class.

**Class, Registration, and Refund Policies:**

**Class registration should be received by the registrar 2 weeks prior to the start of the first class.**  
 Acceptance of registration for a class is at the discretion of the registration secretary and/or the training director. Full refunds will be granted with at least one week's notice before the start of a class session. After that time no refunds will be made.  
 Please BRING in proof of vaccines including RABIES when you register or by first night of class.  
 Bitches in season can attend class at the instructor's discretion as long as the dog wears panties.  
 If a student is asked to leave a class by the instructor or training committee within the first two classes due to aggression, a full refund will be made. After the 2nd class, no refund will be made.

**\*\*\*Please fill out Release Waiver on Back\*\*\***

High Point K-9 Center, LLC  
2224 Mt. Hope Road  
Middletown, NY 10940  
(845) 386-9929

**Agreement to Hold Harmless, Waiver and Assumption of Risk.**

I, the undersigned understand and agree that attendance or any function at High Point K-9 Center is not without risk to myself, members of my family, my dog or any guests who visit said facility. I realize the dogs, the above stated persons and I may be exposed to activities that may be difficult to control and may cause injury even when handled with the highest level of care. I hereby waive and release High Point K-9 Center, it's employees, members, guests and other agents from any and all liability of any nature, for injury of damage resulting from the actions of any employee, dog, individual, or training activity, and I expressly assume the risk of such damage or injury while on any grounds used by High Point K -9 Center in association with High Point K-9 Center activities.

I also agree to release from responsibility any person or company upon show property that may be holding any activity.

**PHOTO AUTHORIZATION:**

Please check one of the following.

\_\_\_\_\_ Authorize

\_\_\_\_\_ DO NOT Authorize

By checking the above, I authorize High Point K-9 Center to use any photographs taken of my dog(s) and myself during classes, events, and visits on HPK9 printed material and/or website.

(Please Print)

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

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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