Private Training Service Contract

Client & Dog Information

Owner's Name:	Referred By:
Home Phone:	Work Phone:
Cell Phone:	Email:
Address:	
Dog's Name:	Breed/Age/Sex:
Dog's Name:	Breed/Age/Sex:

Emergency & Health Information

Emergency Contact:	Phones:
Vet Office/ Vet's Name:	Phone:
Current Medications:	Reason(s) for Meds:
Important Medical History Notes:	
May we share your training & behavior report with your veterinarian? ☐ Yes ☐ No	

Known Behavioral Issues

Known Behavioral Issues:
Known Bite History:

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Liability Waiver & Policies

1. Wild Trail Dog Training will endeavor to create as safe an environment as possible for the training of my dog and will offer only sound, safe, and responsible training and training instructions. However, to the extent that Wild Trail Dog Training is insured for any unintentional or negligent errors, omissions, or incorrect assertions, Wild Trail Dog Training will be responsible for any such acts or omissions, but only to the extent of such insurance. I have been told by Wild Trail Dog Training and understand the inherent risks of owning a dog, including but not limited to the risk of dog bites to myself or others. I represent and warrant that I have provided Wild Trail Dog Training with full and complete, accurate information regarding any bite history and similar incidents or hazardous tendencies of my dog, and that I will update that information if it changes. I understand that I am and will remain responsible for the actions of my dog at all times, and I hereby agree to indemnify, release, and hold harmless Wild Trail Dog Training of any and all claims, whether made my myself or any third party, of injury, expense, costs, or damages caused by my dog. I understand that the recommendation of any other product or service is not a guarantee of my satisfaction with that product or service. This contract, together with language expressly incorporated into it in writing, is the full and complete agreement between myself and Wild Trail Dog Training. A complete and accurate copy of this contract is as valid as the original. This contract is made valid by in-person signatures, electronically signed signatures, or upon receipt of a signed, scanned copy by email. Initial:

2. *I authorize Wild Trail Dog Training to enter my home during agreed upon days and hours for the purpose of training my dog.*

Initial:

3. *I authorize Wild Trail Dog Training to take my dog off my property during the agreed upon days and hours for the purpose of training my dog.*

Initial:

4. I authorize emergency medical care to be provided for my dog(s) by the above-named veterinarian, or an appropriate alternate to be determined by Wild Trail Dog Training in the event my regular veterinarian is not available or that closer care is required. I will reimburse Wild Trail Dog Training for any charges related to emergency care, including office visits, procedures, medications, surgeries, etc.

☐ I authorize Wild Trail Dog Training to administer or seek 1st aid and resuscitative care for my dog(s) as determined appropriate by Wild Trail Dog Training and I agree to indemnify, release, and hold harmless Wild Trail Dog Training for all and any results thereof.

☐ I DO NOT authorize Wild Trail Dog Training to administer or seek 1st aid and resuscitative care for my dog(s) as determined appropriate by Wild Trail Dog Training and I agree to indemnify, release, and hold harmless Wild Trail Dog Training for all and any results thereof.

Initial:

I agree that my dog may appear on Wild Trail Dog Training's website, Facebook, Instagram, and advertising from time to time.

Initial:

This contract is validated by the signatures below in total and as approval for future services without additional written authorization.

Owner	Date	Trainer	Date