



Flying Paws Agility Club

Date: _____

Class Registering For:
(please circle one)

Introduction to Obstacles

Sequencing Obstacles

Owner's Information

Name: _____

Email: _____

Phone: _____ Other Phone: _____

Address: _____

How did you hear about us? _____

Dog's Information

Dog's Name: _____ Breed: _____

Age: _____ Sex: _____ Neutered/Spayed: Yes No

Time Practicing Agility: _____

Rabies Vaccination Date/Year: _____

Vet's Name: _____

Emergency Contact

Name: _____

Phone: _____ Relationship: _____

Flying Paws Agility Club Liability Release

I (we) agree to hold the club, Flying Paws Agility Club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim; and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or damage to this dog.

Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons.

Furthermore, I (we) certify that this dog's rabies vaccination is current in accordance with the requirement of the state of Indiana, which requires all dogs three (3) months and older to be vaccinated or boosted against rabies, and holds the owner of the animal responsible for procuring the vaccinations required by Indiana law (345 IAC 1-5-2).

I (we) agree that any cause of action, controversy or claim arising out of or related to the attendance at the club (unless otherwise stated in its premium list) and myself (ourselves) or as to the construction, interpretation and effect of this Agreement shall be settled by arbitration pursuant to the applicable rules of the American Arbitration Association.

(Printed Name)

(Signature)

(Date)

