



Positive Dog Training School

20612 NE Woodinville-Duvall Road

Woodinville, WA 98077-7746

Class Registration

Please fill out this form and mail it along with payment to the address above.

Class Information

Class Name: _____ Class Day: _____

Class Start Date: _____ Class Start Time: _____

Handler Information

Handler Name: _____
First Last

Email: _____

Day Phone: _____ Evening Phone: _____

Address: _____

Address 2: _____

City: _____ Zip: _____

Emergency Contact: _____ Phone: _____
Name

Dog Information

Dog Name: _____ Breed: _____

Sex: _____ Age: _____ Spayed / Neutered? _____
M or F Yes or No

Accept Waiver (required)

By signing I release Positive Dog Training School, Joan Fetty, and other Staff from all liability for damages or injuries of any nature that may arise in connection with dog training classes.

Signature: _____
First and Last Name