



Release Form

The undersigned person(s) has registered to participate in a dog training class, private dog training lessons, or any other dog related activity ("activity") at 6677 S. County Road 157, Strasburg, Colorado 80136. All activities, which the undersigned person(s) and dog(s) attend, are subject to this release.

1. I hereby certify that I am the owner(s) of _____/_____, the dog(s) that will participate in the activity.
2. I understand that other dogs and people will attend the activity and that during the course of training, my dog will come into direct contact with other participating dogs and people on the property.
3. I hereby certify that the named dog has been fully vaccinated for canine distemper, canine parvovirus, canine hepatitis, canine leptosporosia, bordetella (DBLPP) and rabies. In view of the fact that my dog will come into direct contact with other dogs on the property, I am aware that my dog may be exposed to those infectious diseases described above; however, since signing this release form certifies that my dog is fully vaccinated against those diseases, I alone assume responsibility for any such exposure.
4. I am aware that given the sometimes-unpredictable nature of dogs, an interaction could take place between dogs at the activity, which may result in injury to my dog, to myself, to other dogs, to other people or damage to personal property. I am also aware that the sport of "Dog Agility" has inherent risk factors, which may cause injury to my dog, to myself, to other dogs or to other people. However, in order for my dog to participate in the activity I alone assume responsibility for any such injury.
5. As to Sandra L. Chiavelli, d/b/a Prairie Dog Acres, LLC, her independent contractors or assistants, I hereby waive and release any actions, causes of actions, damages, rights, claims or lawsuits which I may have for any reason, including but not limited to: (a) any and **all** personal injury, property damage and property loss, which I may sustain arising out of any interaction between dogs and/or people participating in the activity or residing on the property, and (b) any and all injury, illness or diseases sustained by my dog(s) arising out of or stemming from its participation in the activity.
6. I understand that dog(s) displaying aggressive behavior, as determined by Sandra L. Chiavelli, will be barred from participation in any and all activities and no refunds will be given.
7. I have read and understand this release form and I will honor and abide by the terms and conditions set forth above.

OWNER (S) NAME: _____

ADDRESS: _____

HOME PHONE: _____ OTHER: _____

E-MAIL: _____

DOG'S NAME: _____ AGE: _____ BREED: _____

SIGNATURE OF OWNER (S): _____

SIGNATURE OF PARENT OR GUARDIAN IF OWNER IS UNDER 18: _____

OTHER HANDLERS: _____

DATE SIGNED: _____