

## *Mail In Registration Form*

Please print and fill this form out then mail, with complete payment, to: Teacher's Pet Training Academy, LLC, P.O. Box 44671, Madison, WI 53744 (**make check payable to: Teacher's Pet Training Academy, LLC**).

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

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Dog's name: \_\_\_\_\_

Breed : \_\_\_\_\_

Sex (fixed?): \_\_\_\_\_ Age: \_\_\_\_\_

Classes or Events (name, location, day, time) you are registering for: \_\_\_\_\_

Has your dog had any training before? Please describe: \_\_\_\_\_

How did you hear about our classes? \_\_\_\_\_

Other Notes?: \_\_\_\_\_

**PAYMENT: Your spot in class is not officially reserved until payment has been received in full.** We accept cash and checks (**made payable to Teacher's Pet Training Academy, LLC**). Class fees are only refundable if you cancel your reservation at least seven days prior to the start of class.

I certify that my pet is current on its vaccinations for Bordatella, Rabies, and Distemper, and is currently on a flea prevention program. If my dog is too young to have been given all of these vaccinations, they will be administered at the appropriate age. I understand all the above and accept full responsibility for the acts of myself, my dog, and my guests while attending classes. I understand that Teacher's Pet Training Academy, LLC cannot be held responsible for any injury caused by my pet, or to my pet, and release Teacher's Pet Training Academy, LLC from all claims of liability. I certify, as evidenced by my signature, to the best of my knowledge all the above information is accurate.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print your Name Pet's Name

**Thanks for choosing Teacher's Pet Training Academy, LLC, we will email or mail (if no email is provided) you a confirmation letter with details on what to bring for class about a week before the start of your class. We look forward to having you in class!**