

**Linda Brodzik – Canine Behavior & Training Specialist
Group Class Application**

Please Print Clearly

Owner's Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: hm _____
E Mail Address _____
Breed: _____ Pet's Name: _____ Age: _____ M/F

Please check class you wish to attend

Obedience Behavior I ___ II ___ III ___ IV (Out on the Town) ___ Training Games I ___ II ___
Agility and Games Class I ___ II ___ Trick Dogs I ___ II ___ Free Style I ___ II ___

Other _____

Starting Date: _____ Time: _____

Referred by: _____

What are your expectations of this class? _____

All classes are \$125.00 for an 8-week session. To reserve a place in a class, please print this application and complete it, and mail it with your \$125.00 check MADE PAYABLE TO:

Linda Brodzik
2715 Hillsboro Avenue, North #306
New Hope, MN 55427
763-458-6232 or 763-577-0761

Due to the limited enrollment of our classes, and the costs involved, we offer refunds as follows:

\$100.00 refund if cancelled prior to, but greater than one week of start date

\$50.00 refund if cancelled within one week of start date

No Refunds if cancelled on day of, or after first session

Linda Brodzik- Canine Behavior & Training Specialist – Hold Harmless Agreement

In signing this release, I/we acknowledge that I/we understand the intent of the services provided by Linda Brodzik, Canine Behavior & Training Specialist. I/we hereby agree to absolve and hold harmless Linda Brodzik and any other parties connected with the services being provided in any way, singly or collectively, from and against any blame and liability for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the services or any actions therewith. I/we hereby consent to and permit emergency treatment for illness or injury and assume all financial obligations resulting there from.

Signature: _____ Date: _____

Print Name: _____

Signature of Parent (if under 18 years of age): _____