Date:	TOP KELLINGS
	FITNESS

How old was the dog when training started?

Internal Use:
Vaccine Record Rec'd ☐
Collar #

			<u> </u>	<u>D</u>	og Trai	<u>ining</u>	g Agre	<u>emen</u>	<u>t</u>			
Owner:						Dog	Name:] Male 🔲 Fer	nale	
Address:						Bree	ed:					
City:		Zip	:			Wei	ight: lk	OS.				
Phone:						Дре	· vears	month	ıs ı	weeks		
Phone: Age:years							weeks					
E-mail:						•	yed/Neutere					
Payment: Check #_		_□c	ash 🗌] v	enmo: Fron	n (@)			PayPal:	From		
☐ Visa/MC			CashAp	p: l	From (\$)							
Please circle package(s) selecte	d:		Pr	rice: \$							
Basic	Advanc	ed		Е	Basic/Adv Co	ombo	1w 2w B8	kΤ	1w B&	T w/classes	Da	y Camp
Reason for Consult / T	Reason for Consult / Training: What is the main Country Chewing Country Chewing											
behavior problem or complaint?	Agg	Barking gression Nipping		Sur	Counter Surfing / Food Begging		Separation Anxiety		ng	Other		
Does your dog do well with other people?	Ye	S	No	ס	If no, expla	ain:						
Does your dog do well with other dogs?	Yes No If no, explain:											
Training History:												
Is your dog housetrained? Yes No If no, any accidents? Frequency:												
What training has you	ur dog ha	ad? (Circle all	that	t apply:		T					
None	Traine				Attended Cla		Graduated	. ,		ate Trainer		Other
What methods were	used in t	rainin	g? (i.e	., ch	hoke chains,	clicker/	treats) – Plea	ase be spe	cific:			

If ended, at what age?

Home Environment:							
Number of people living in your household, including yourself. If children, indicate ages.							
Please list all animals in the household, inc Other Pets?		inging, in the order in					
Other Pets?	No		Yes				
If yes, please describe:							
How many hours per day left alone?							
Other:							
How did you hear about us?							
I.e., Facebook, Web Search, Referral, etc.	(If referral, please specify)					
I understand Rocky Top K9, LLC may use m without obligation or liability of any kind to							
	For this to apply, I must no ondition. Other than this will forfeit their deposit ar	otify Rocky Top K9, Ll condition, there are nnd/or class time. Class	C in writing within 24 hours past the first or refunds. No Shows or Appointments appointments cancelled 24 hours or more				
must completed within four months of sta	rting date. For Board & Tr	rain programs, a \$300	and that completion of purchased program deposit is required and is nonrefundable. wise, a separate deposit will be required to				

Terms and Conditions

Initial __

I understand that I have a vital role in my dog's learning process and in achieving the desired results. Although Rocky Top K9, LLC guarantees that every effort will be made to ensure my satisfaction and positive behavioral modification, I acknowledge and agree that there is no guarantee that my dog will achieve the desired level of training or be cured of its behavior issues, despite the best efforts of the trainer. I also understand and agree that lack of full disclosure regarding any major aggression, anxiety, or fear disorders my dog may have or display while under the care of my trainer that could place a person or animal at risk will void my Rocky Top K9, LLC Obedience Guarantee. I understand while my dog will still obtain a high level of obedience training, aggression and anxiety disorders are psychosomatic in nature and while possible to manage, may not be changed. Our guarantee is contingent on the owner's and family's active and ongoing participation with consistently practicing what is learned in training. Continual training, practice, and following the guidelines provided must continue after the dog's program has ended. True success is always achieved through the owner's willingness to continue the obedience standard. Failure to comply will negate the guarantee.

hold the new date. There are no refunds for any payments and/or deposits for a cancellation of a B&T without a two-week notice.

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Health and Safety

I have enrolled myself and my dog in a training course offered by Rocky Top K9, LLC in Private Classes, Day Camp, and/or a Board & Train program. I understand that Rocky Top K9, LLC does everything it reasonably can to provide a healthy and safe training environment for everyone and every dog and will always put my dog's safety first. I also understand that participation in any of these programs are not without some risk, that despite all the dogs appearing healthy and being handled with the greatest amount of care and foresight, dogs are not always predictable and the unexpected may occur. I acknowledge and agree that the risks of training in a group and/or public environment include, but are not limited to, my dog or myself contracting a communicable disease, my dog or myself being injured, and my dog or myself being bitten by another dog. I hereby hold Rocky Top K9, LLC harmless of any liability for any loss or damage to me, my dog or my property including, but not limited to, loss or damage from disease, other dogs, other persons, other pets, my dog running away, natural disasters, fires, or other unavoidable causes.

I certify that my dog is in good health, that I have not withheld any medical or other health issues and has not been ill with any communicable conditions within the past 30 days. My dog has not been exposed to Rabies, Distemper, Hepatitis, Leptospirosis, Parainfluenza, Parvovirus, or Bordetella (kennel cough) within a 30- day period prior to enrollment. I further certify that my dog is current on all vaccinations including Rabies (puppies younger than 4 months of age excluded), DHLPP, and Bordetella, with the last vaccination having been received no less than seven (7) days prior to enrollment. I agree to provide proof of vaccinations prior to the start of the training course. I agree to keep my dog's vaccinations up to date during the training course. I further agree that I will be responsible for any debt incurred, in the event my dog needs to be seen by a veterinarian during his stay.

I acknowledge and agree that I am solely responsible for my dog and my dog's action during training and in the future. I acknowledge and agree that any training my dog and I receive or contract for does not constitute any guarantee whatsoever that my dog will not cause harm or loss, intentional or unintentional, to a human being, animal, or property. I hereby hold Rocky Top K9, LLC harmless of any liability for my dog or any of my dog's actions including, but not limited to, intentional or unintentional actions that cause harm or loss to a human being, animal, or property, during the training period, or at any time in the future.

Non-Compete

I understand that I am being taught dog obedience and behaviorist lessons as they pertain to my dog and my personal situation. I agree to not directly or indirectly compete with the business of Rocky Top K9, LLC and its successors. I agree to not own, manage operate, consult, or be employed in a business substantially similar to, or competitive with, the present business of Rocky Top K9, LLC or such other business activity in which Rocky Top K9, LLC may substantially engage in. This non-compete agreement shall extend for a radius of 300 miles of any Rocky Top K9, LLC location and shall be in full force and effective for three years commencing with the start date of training.

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This agreement shall be deemed to have been made in, and shall be construed pursuant to, the laws of the State of Tennessee. This contract shall be binding on the heirs, administrators, personal representatives, and assigns of the Owner and Dog Training for Owners. Any controversy or claim arising out of or relating to this contract, or the breach thereof, or as the result of any claim or controversy involving the alleged negligence by any party to this contract shall be settled in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by an arbitrator may be entered in any Court having jurisdiction thereof. The arbitrator shall, as part of his/her award, determine an award to the prevailing party of the costs of such arbitration and reasonable attorney's fees of the prevailing party.

I acknowledge that I have read and agree to the above terms and conditions on this document.

Owner Signature	 Date
Print Name	_

(For Board & Train Only)

Medical History: Please include a copy of pet's vaccine record along with this contract. **

Veterinarian:	Phone Number:
Brand of Dog Food:	
Amount / How Often:	
Does your dog (now or in the past) have any medical conditions or health issues?	Primary Feeder:
Current Medications:	
**Vaccine Waiver and Release of Liability for Illness	
Rocky Top K9, LLC OR have opted out of vaccinations that may be	t my decision to not vaccinate is mine alone, and against the policy agents harmless from prosecution or any responsibility related to ess related to not vaccinating my dog and I assume all

Complete and return to info@rockytopk9.com.

If paying by check, mail to:

Rocky Top K9, LLC

1428 Indian Warpath Rd

Sevierville, TN 37876

Contract must be completed on or before the first lesson.

Does not apply to consultation.

For questions, please contact us at 865-276-6004

Thank you!