



# Oh My Dog! K9 Consulting Inc.

## Behavior & Training Waiver

Home Care, or other services provided by Oh My Dog! K-9 Consulting Inc.

I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending sessions with: Oh My Dog! K-9 Consulting Inc.

I further understand that due to the way that dogs interact with one another, minor cuts and scratches can occur even though the dogs are carefully supervised at all times. I understand that all costs in connection with, veterinary, medical or other treatments shall be my responsibility.

I, further understand that due to the physical nature of any dog training session I attend with Oh My Dog K9 Consulting Inc. there is risk of personal injury to myself, or my family members.

I hereby release and agree to save and hold harmless: Oh My Dog! K-9 Consulting Inc, its associates, assistants, employees, shareholders, contractors, members and agents from any and all liability, claims, suits, actions, loss, injury or damage of any nature or kind, or for any liability, claims, suits, actions, loss, injury or damage which I, my family member(s), or my dog(s) sustain, or which may be caused in any way . I, specifically, without limitation, agree to fully indemnify Oh My Dog! K-9 Consulting Inc. for any and all such liability, claims, suits, actions, losses, injury or damage to my person, or attending family member(s ) while I attend sessions and when my dog is under the care of Oh my Dog! K-9 Consulting Inc. Including any: shareholders, volunteers, employees, members, agents, associates, or contractors or location where these sessions are held...

I certify that I have read and understand the rules and regulations set forth herein and that I have read and understand this agreement. I agree to abide by the rules and regulations and accept all of the terms, conditions, and statements of this agreement and confirm the truthfulness of the contents of the Application Form completed by me. I am of the full age of Eighteen years of age. *I Give consent for family member(s) named on this form (under the age of 18years old) to attend these sessions while under my supervision.*

\_\_\_\_\_  
Signature of dog owner/ handler

\_\_\_\_\_  
Legal guardian of minor children attending:

\_\_\_\_\_  
name of child

witness\_\_\_\_\_

Date\_\_\_\_\_