

## Riverside Canine Center

48 Bridge Street  
Nashua, NH 03060  
603-889-9800  
www.riversidek9.com

# Agility Seminar Registration Form

Owner: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

Seminar Title \_\_\_\_\_

Seminar Date: \_\_\_\_\_ Seminar Level: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Breed \_\_\_\_\_

Age: \_\_\_\_\_ Competition Level \_\_\_\_\_

What are your personal goals for this seminar?

**Send Registration form to:** Riverside Canine Center, 48 Bridge St, Nashua, NH 03060  
**For confirmation email Joan Lawson at:** joan@riversidek9.com

I/we agree to hold harmless Joan Lawson d/b/a Riverside Canine Center & all persons connected here within any capacity whatsoever from any & all cost, liability & expense for any injury or damage to person(s), dog(s) or property brought to class or any other events held or sponsored by same. I/we agree to hold harmless Joan Lawson d/b/a Riverside Canine Center & all persons connected here within any capacity whatsoever from any & all cost, liability & expense for any injury or damage caused by any dog(s) owned by me/us brought to class or any other events held or sponsored by same. I/we further agree that the trainers have the right to refuse training to any dog that repeatedly displays a vicious aggressive manner that is believed by the trainers not manageable by his/her owner or handler and that the trainers have the right to excuse any dog that appears in poor health.

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

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

**Directions can be found at: [www.riversidek9.com](http://www.riversidek9.com)**