

### ***Dog Owner's Liability Release Form***

This agreement is between Pleasant Pooch, LLC, it's owners Kristin N. Higgs and our affiliates, and our guests

(called Owner) \_\_\_\_\_.

Owner is releasing \_\_\_\_ (quantity) dog(s)

Named: \_\_\_\_\_ (called Dog).

Breed(s): \_\_\_\_\_ Approximate Weight: \_\_\_\_\_

#### **Section I: Owner**

**1. Risk of Loss:** Owner hereby assumes and shall bear all risk of loss, injury, illness, disease and damage of any kind or nature to the Dog while in the possession of Pleasant Pooch, LLC, or any other third party and shall hold Pleasant Pooch and its owners harmless for such claims.

**2. Indemnity:** Owner hereby assumes and shall bear all risk of loss, injury, illness, disease and damage of any kind or nature to any person, animal or property of Owner, Pleasant Pooch, LLC, or others caused by the Dog, the actions or inactions animals and agrees to indemnify and defend Pleasant Pooch, LLC, and hold Pleasant Pooch, LLC, harmless for such claims.

**3. Health Status:** Owner represents and warrants that the Dog is healthy, in good condition and has not been exposed to any infectious or contagious disease. Owner agrees to immediately notify Pleasant Pooch of any change in the Dog's health or condition or of any illness, injury, or exposure to an infectious or contagious disease. Owner represents and warrants that the Dog has been given a recent Rabies vaccination and all other relevant shots/vaccinations. Upon request of Pleasant Pooch, Owner shall provide proof of such test and the results. Further, upon request, Owner shall provide a current health certificate and proof of ownership of Dog.

**4. Emergency:** Pleasant Pooch reserves the right to provide or secure emergency services for the Dog(s) named above, if, at Kristin N. Mill's discretion, the Dog is in serious need of such services and Owner cannot be reached at the emergency contact number. Kristin N. Mills has permission to secure such care as is necessary to protect health and welfare of the Dog. Owner agrees that if immediate or emergency care is directed by Owner or provided as per this paragraph, Owner shall be solely responsible for the costs of any and all such care.

#### **Section II: General Terms**

**1.Services:** Additional services including food and other care available through Pleasant Pooch, LLC, upon request at extra costs, to be agreed to by the parties in advance of such requested services. Please note the cost of boarding is \$34.00 a day. That starts from the time of drop off and starts over at 11:00 AM the next day. Any dog not picked up before 11:00 will be charged for that full day of boarding.

**2. Governing Law:** This Agreement shall be governed by and construed in accordance with the laws of the State of Oklahoma. The parties agree that any disagreement shall only be mitigated by the laws and through the State of Oklahoma.

**3. Entire Agreement; Amendment; Binding Effect:** This instrument contains the entire agreement of the parties and all the covenants and agreements between the parties concerning same. Unless otherwise specifically provided herein, this Agreement may not be changed except by written agreement duly executed by the parties hereto. This Agreement shall inure to the benefit of and be binding upon the parties hereto and their respective successors, heirs, affiliates and personal representatives.

Dog Owner \_\_\_\_\_

Dated \_\_\_\_\_

Pleasant Pooch, LLC (Kristin N. Higgs) \_\_\_\_\_

Dated \_\_\_\_\_

(405)513-PAWS (7297)  
info@pleasantpooch.com

## Training Guidelines

All dogs that come to our facility **must** be up to date on all vaccinations before undergoing training (this includes classes). If your dog is under the age of 12 weeks then they are required to have had their first two rounds of shots and the owner must sign an Assumption of Risk Release. Owners are required to bring the following items to use for training: a dog bed/blanket, a flat buckle or belt collar (absolutely no prong or choke collars), a 6 foot leash (no retractable leashes), and treats that your dog favors.

The training packages are as follows:

Day Camp – 5 days.....	<b>\$325.00</b>
Individual Day Camp (does not include daycare price).....	<b>\$55.00</b>
1 Private Lesson (In home).....	<b>\$65.00</b>
1 Private Lesson – 2 dogs (In home).....	<b>\$75.00</b>
3 Private Lessons (In home).....	<b>\$180.00</b>
3 Private Lessons – 2 dogs (In home).....	<b>\$205.00</b>
5 Private Lessons (In home).....	<b>\$285.00</b>
5 Private Lessons – 2 dogs (In home).....	<b>\$325.00</b>
8 Private Lessons (In home).....	<b>\$430.00</b>
8 Private Lessons – 2 dogs (In home).....	<b>\$495.00</b>

We offer private lessons either at Pleasant Pooch or at your house. Lessons are for 1 hour of one-on-one training with one of our dog trainers. We can also do a lesson in a public space, like a park, to simulate real-world circumstances after we have laid the foundations for your pet's training. More info on our private lessons can be found at <https://www.pleasantpooch.com/private-training>.

**There is no Day Camp on weekends.**

### **Training Agreement**

I, \_\_\_\_\_, understand all the terms and charges for training rates and rules that are listed above.

Applicant Signature\_\_\_\_\_

**Please include a snapshot of your dog(s) if possible. Thank you!**

## **TRAINING APPLICATION**

Please feel free to contact us with any questions!  
Email [info@pleasantpooch.com](mailto:info@pleasantpooch.com) or call (405) 513-7297.

**Days & Times Available:** \_\_\_\_\_

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### **OWNER INFORMATION**

Name:

Address:

City and State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

E-mail Address:

### **PAYMENT INFORMATION**

*(A credit card is required to hold your reservation. If reservation is canceled within 72 hours of the start date, you will be charged a cancellation fee of \$35.00 per pet.)*

Name on Card:

Card Type:

Credit Card #

Expiration date:

Billing Zip Code:

### **EMERGENCY CONTACT INFORMATION**

*(Please list someone besides yourself)*

Name:

Relation to Owner:

Home Phone:

Cell Phone:

Who besides yourself is authorized to pick-up your dog(s)?

1. Name:

Phone:

Relation to Owner:

2. Name:

Phone:

Relation to Owner:

## Dog 1

### PET INFORMATION

Name: Sex (*check one*): **FEMALE** **MALE**  
Reproductive Status (*check one*): **Spayed** **Neutered** **Unaltered**

Breed: Weight:

Birthday (MM/DD/YYYY) or Approximate Age:

Colors/Markings:

How often do you feed your dog? (*check one*) **1x** **2x** **3x**

Amount per Feeding: Brand of Food:

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC? **NO** **YES**

Are there other animals in your household? *If yes, please list below:* **NO** **YES**

Does your dog like children? **NO** **YES**

How does your dog behave around children?

Does your dog get along with the other resident animals? **NO** **YES**

*Explain:*

Has your dog shared food, water, or toys with other animals? **NO** **YES**

Is your dog housetrained? **NO** **YES**

*Please list command used, if any.*

Is your dog crate trained? **NO** **YES**

Does your dog bark a lot? **NO** **YES**

*Explain:*

Does your dog have any past or current injuries or disabilities? **NO** **YES**

*Explain:*

## Dog 1

Is your dog toy/food aggressive?      **NO**      **YES**

*Explain:*

Does your dog play well with other dogs?      **NO**      **YES**

*Explain:*

How does your dog behave around puppies?

Has your dog ever socialized off-leash with other dogs?      **NO**      **YES**

Does your dog have any sensitive areas on their body?      **NO**      **YES**

*Explain:*

Has your dog ever bitten a person?      **NO**      **YES**

*Explain:*

Has your dog ever growled/snapped at anyone taking away food or toys?      **NO**      **YES**

*Explain:*

Has your dog ever dug under a fence and escaped?      **NO**      **YES**

*If yes, how many times?*

Has your dog ever jumped/climbed a 4ft chain-link fence?      **NO**      **YES**

Has your dog ever jumped/climbed a 6ft chain-link fence?      **NO**      **YES**

Has your dog ever suffered from heat stroke?      **NO**      **YES**

*If yes, please explain:*

### **MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?      **NO**      **YES**

Medication & Directions:

Will we be administering?      **NO**      **YES**

Do they have any allergies or special needs? *If yes, please list below.*      **NO**      **YES**

## Dog 1

### **TRAINING INFORMATION**

Has your dog ever been in training before?                      **NO**      **YES**

If they were in a training class, how did they behave and what did they learn?

How does your dog behave on a leash?

Please list any behavior issues:

What are your goals for private lessons?

Is there anything specific you want the trainer to focus on?

## Dog 1

### **ADDITIONAL INFORMATION**

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before?      **NO**    **YES**

Has your dog ever been boarded before?      **NO**    **YES**

**Is there anything else we need to know about your dog?**



## Dog 2

### PET INFORMATION

Name: Sex (*check one*): **FEMALE** **MALE**  
Reproductive Status (*check one*): **Spayed** **Neutered** **Unaltered**

Breed: Weight:

Birthday (MM/DD/YYYY) or Approximate Age:

Colors/Markings:

How often do you feed your dog? (*check one*) **1x** **2x** **3x**

Amount per Feeding: Brand of Food:

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC? **NO** **YES**

Are there other animals in your household? *If yes, please list below:* **NO** **YES**

Does your dog like children? **NO** **YES**

How does your dog behave around children?

Does your dog get along with the other resident animals? **NO** **YES**

*Explain:*

Has your dog shared food, water, or toys with other animals? **NO** **YES**

Is your dog housetrained? **NO** **YES**

*Please list command used, if any.*

Is your dog crate trained? **NO** **YES**

Does your dog bark a lot? **NO** **YES**

*Explain:*

Does your dog have any past or current injuries or disabilities? **NO** **YES**

*Explain:*

## Dog 2

Is your dog toy/food aggressive?      **NO**      **YES**

*Explain:*

Does your dog play well with other dogs?      **NO**      **YES**

*Explain:*

How does your dog behave around puppies?

Has your dog ever socialized off-leash with other dogs?      **NO**      **YES**

Does your dog have any sensitive areas on their body?      **NO**      **YES**

*Explain:*

Has your dog ever bitten a person?      **NO**      **YES**

*Explain:*

Has your dog ever growled/snapped at anyone taking away food or toys?      **NO**      **YES**

*Explain:*

Has your dog ever dug under a fence and escaped?      **NO**      **YES**

*If yes, how many times?*

Has your dog ever jumped/climbed a 4ft chain-link fence?      **NO**      **YES**

Has your dog ever jumped/climbed a 6ft chain-link fence?      **NO**      **YES**

Has your dog ever suffered from heat stroke?      **NO**      **YES**

*If yes, please explain:*

### **MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?      **NO**      **YES**

Medication & Directions:

Will we be administering?      **NO**      **YES**

Do they have any allergies or special needs? *If yes, please list below.*      **NO**      **YES**

## Dog 2

### **TRAINING INFORMATION**

Has your dog ever been in training before?                      **NO**      **YES**

If they were in a training class, how did they behave and what did they learn?

How does your dog behave on a leash?

Please list any behavior issues:

What are your goals for private lessons?

Is there anything specific you want the trainer to focus on?

### **ADDITIONAL INFORMATION**

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before?      **NO**      **YES**

Has your dog ever been boarded before?      **NO**      **YES**

**Is there anything else we need to know about your dog?**

## PET INFORMATION

Name: Sex (*check one*): **FEMALE** **MALE**  
Reproductive Status (*check one*): **Spayed** **Neutered** **Unaltered**

Breed: Weight:

Birthday (MM/DD/YYYY) or Approximate Age:

Colors/Markings:

How often do you feed your dog? (*check one*) **1x** **2x** **3x**

Amount per Feeding: Brand of Food:

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC? **NO** **YES**

Are there other animals in your household? *If yes, please list below:* **NO** **YES**

Does your dog like children? **NO** **YES**

How does your dog behave around children?

Does your dog get along with the other resident animals? **NO** **YES**

*Explain:*

Has your dog shared food, water, or toys with other animals? **NO** **YES**

Is your dog housetrained? **NO** **YES**

*Please list command used, if any.*

Is your dog crate trained? **NO** **YES**

Does your dog bark a lot? **NO** **YES**

*Explain:*

Does your dog have any past or current injuries or disabilities? **NO** **YES**

*Explain:*

## Dog 3

Is your dog toy/food aggressive?      **NO**      **YES**

*Explain:*

Does your dog play well with other dogs?      **NO**      **YES**

*Explain:*

How does your dog behave around puppies?

Has your dog ever socialized off-leash with other dogs?      **NO**      **YES**

Does your dog have any sensitive areas on their body?      **NO**      **YES**

*Explain:*

Has your dog ever bitten a person?      **NO**      **YES**

*Explain:*

Has your dog ever growled/snapped at anyone taking away food or toys?      **NO**      **YES**

*Explain:*

Has your dog ever dug under a fence and escaped?      **NO**      **YES**

*If yes, how many times?*

Has your dog ever jumped/climbed a 4ft chain-link fence?      **NO**      **YES**

Has your dog ever jumped/climbed a 6ft chain-link fence?      **NO**      **YES**

Has your dog ever suffered from heat stroke?      **NO**      **YES**

*If yes, please explain:*

### **MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?      **NO**      **YES**

Medication & Directions:

Will we be administering?      **NO**      **YES**

Do they have any allergies or special needs? *If yes, please list below.*      **NO**      **YES**

**TRAINING INFORMATION**

Has your dog ever been in training before?                      **NO**      **YES**

If they were in a training class, how did they behave and what did they learn?

How does your dog behave on a leash?

Please list any behavior issues:

What are your goals for private lessons?

Is there anything specific you want the trainer to focus on?

**ADDITIONAL INFORMATION**

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before?      **NO**    **YES**

Has your dog ever been boarded before?      **NO**    **YES**

**Is there anything else we need to know about your dog?**



**PET INFORMATION**

Name: \_\_\_\_\_ Sex (*check one*):      **FEMALE**      **MALE**

Reproductive Status (*check one*):      **Spayed**      **Neutered**      **Unaltered**

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

Birthday (MM/DD/YYYY) or Approximate Age: \_\_\_\_\_

Colors/Markings: \_\_\_\_\_

How often do you feed your dog? (*check one*)      **1x**      **2x**      **3x**

Amount per Feeding: \_\_\_\_\_ Brand of Food: \_\_\_\_\_

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC?      **NO**      **YES**

Are there other animals in your household? *If yes, please list below:*      **NO**      **YES**

Does your dog like children?      **NO**      **YES**

How does your dog behave around children?

Does your dog get along with the other resident animals?      **NO**      **YES**  
*Explain:* \_\_\_\_\_

Has your dog shared food, water, or toys with other animals?      **NO**      **YES**

Is your dog housetrained?      **NO**      **YES**  
*Please list command used, if any.* \_\_\_\_\_

Is your dog crate trained?      **NO**      **YES**

Does your dog bark a lot?      **NO**      **YES**  
*Explain:* \_\_\_\_\_

Does your dog have any past or current injuries or disabilities?      **NO**      **YES**  
*Explain:* \_\_\_\_\_

## Dog 4

Is your dog toy/food aggressive?      **NO**      **YES**

*Explain:*

Does your dog play well with other dogs?      **NO**      **YES**

*Explain:*

How does your dog behave around puppies?

Has your dog ever socialized off-leash with other dogs?      **NO**      **YES**

Does your dog have any sensitive areas on their body?      **NO**      **YES**

*Explain:*

Has your dog ever bitten a person?      **NO**      **YES**

*Explain:*

Has your dog ever growled/snapped at anyone taking away food or toys?      **NO**      **YES**

*Explain:*

Has your dog ever dug under a fence and escaped?      **NO**      **YES**

*If yes, how many times?*

Has your dog ever jumped/climbed a 4ft chain-link fence?      **NO**      **YES**

Has your dog ever jumped/climbed a 6ft chain-link fence?      **NO**      **YES**

Has your dog ever suffered from heat stroke?      **NO**      **YES**

*If yes, please explain:*

### **MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?      **NO**      **YES**

Medication & Directions:

Will we be administering?      **NO**      **YES**

Do they have any allergies or special needs? *If yes, please list below.*      **NO**      **YES**

**TRAINING INFORMATION**

Has your dog ever been in training before?                      **NO**      **YES**

If they were in a training class, how did they behave and what did they learn?

How does your dog behave on a leash?

Please list any behavior issues:

What are your goals for private lessons?

Is there anything specific you want the trainer to focus on?

**ADDITIONAL INFORMATION**

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before?      **NO**    **YES**

Has your dog ever been boarded before?      **NO**    **YES**

**Is there anything else we need to know about your dog?**