

MARKIM PET RESORT
4393 Carmel Valley Road, San Diego, CA 92130

Group_____ Private_____ Consultation_____

Date: _____

Owner Name: _____

Address: _____

Phone: (H)_____ (W)_____

Dog's Name: _____ Dog's Age: _____

Breed: _____

The cost of the training class is \$_____. The cost of training must be paid at the first class. Any other arrangements must be made through the trainer.

I agree to conduct myself in accordance with the rules, and further agree to assume full responsibility for the conduct of my dog, while on property. I understand that although the dog training class is scheduled for completion within three weeks, it may require a longer period of time. Individual classes may be canceled due to inclement weather, schedule conflicts or other circumstances beyond the control of Markim Pet Resort and the training instructor.

I understand that there are NO REFUNDS of fees paid for training classes.

I hereby agree to the terms of the above agreement and further agree to hold Markim Pet Resort, and all employees or agents harmless from all liability from loss, damage or claim to myself, my dog, or any other person arising from any occurrence on or off resort property.

Signature

Date