



The Complete Canine, LLC

4767 N. 1st Avenue

Tucson, AZ 85718

completecaninetucson@gmail.com

(520) 988-3792

<u>MAIN Location</u> 4767 N. 1 st Ave. Tucson, AZ. 85718	<u>ORO VALLEY Location</u> 10140 N. Oracle Rd. #140 Oro Valley, AZ. 85737
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Waiver of Liability and Informed Consent Release

Last Name:	First Name:
Home Phone #:	Mobile Phone #:
Email Address:	Dog's Name:
Dog's Breed:	Dog's Age:

I, the undersigned, have enrolled myself and my dog in dog training classes, private consultations, doggy daycare, workshops or other related activities (classes) offered by The Complete Canine, LLC. By signing hereunder, I certify that I have been informed and understand that there is always some unavoidable risk of injury involved when working with animals, especially animals with behavioral issues. I acknowledge that dogs can be inherently difficult to control and that not all dogs will be under control at all times, resulting in the possibility of injury to myself, my dog, my family members, or third parties. Additionally, I have had full opportunity to discuss all concerns I have about the foregoing risks with The Complete Canine, LLC and its authorized representatives. I have also made all inquiries and investigations to my satisfaction related to such risks, including, but not limited to an examination of the training and/or daycare area.

I hereby accept and assume, without reservation, all risks associated with my participation in the classes and/or doggy daycare, including, but not limited to: the risks of any and all injuries to myself, my dog and any of my family members or third parties who may attend; the risks that my dog may cause injury to other persons and/or dogs involved in the classes and/or doggy daycare; and the risks that saliva, water, food and/or other debris may be present in the training/daycare area and risks of nature, environment and property.

As lawful consideration for participating in the classes and/or doggy daycare, I, for myself, my heirs, executors, administrators, legal representatives, successors and assignees (the "Releasing Party"), hereby waive, release, discharge and agree not to sue and to indemnify, defend and hold harmless The Complete Canine, LLC, At-Home Kennels, LLC, St. Francis of the Foothills, and their members, managers, agents and employees (the "Released Party") from any and all injuries, losses, claims, and damages to any person or persons of any nature whatsoever, including claims arising from the Released Party's own negligence, and all costs associated therewithin, including attorney's fees, court costs and consultant fees, arising from my participation in the classes/daycare.

The Waiver of Liability and Informed Consent Release shall be legally binding on the Releasing Party. Should the Releasing Party assert a claim to the contrary to what I have agreed to in the Waiver of Liability and Informed Consent Release, the claiming party shall be liable for all expenses (including attorney's fees, court costs and consultant fees) incurred by both the Releasing Party and the Released Party. No waiver of modification of any provision herein shall be valid unless expressly agreed to in writing by both the Released Party and the Releasing Party.

I hereby consent to my dog being the subject of photographs and/or audiovisual recording and authorize The Complete Canine, LLC to cause the same to be exhibited for educational purposes.

I hereby certify that the documentation that I have provided in reference to vaccinations is complete and accurate to the best of my knowledge.

I represent that I am at least 18 years of age.

Signature: _____ Date: _____

Parent or Guardian Additional Agreement (Must be completed for Participants under the age of 18)

In consideration of _____ (Participants Name) being permitted to participate in classes, I further agree to indemnify, defend and hold harmless The Complete Canine, LLC, At-Home Kennels, LLC and their members, managers, agents and employees (the "Released Party") from any and all injuries, losses, claims and damages to any person or persons of any nature whatsoever, including claims arising from the Released Party's own negligence, and all costs associated therewithin, including attorney's fees, court costs and consultant fees, arising from my participation in the classes.

Parent or Guardian's Printed Name: _____ Date: _____

Signature: _____ Date: _____