



Name: _____ Date: _____

Mailing Address: _____

Business phone: _____ Mobile phone: _____

Email: _____

Dog's Name: _____ Breed: _____ Sex: _____ Desexed? Y N

DOB: _____ Is the dog from a Breeder / Rescue / Other _____

How long have you had the dog? _____

Veterinarian: _____ Phone: _____

It is your responsibility to ensure your dog has the appropriate vaccinations to protect it from diseases potentially transmitted in a boarding, training and socialisation situations. Is your dog vaccinated? Y N Date next vaccination is due: _____

Emergency Contact: _____ Phone: _____

Is your dog people aggressive? Y N Is your dog, dog aggressive? Y N

If yes, please explain: _____

What issues are you having with your dog? _____

How much training has your dog had? _____

Does your dog have food allergies? _____

Further, pursuant to the South Australian Dog and Cat Management Act 1995 (copy attached), I have read and understood Section **45D 'Specific duties relating to attack trained dogs, guard dogs and patrol dogs'** on page 27, and fully understand and agree to abide by the legislation. [Link Regarding Section 45D](#)

Signed: _____ Date _____

(If a minor, a parent or legal guardian must sign.)

Disclaimer

I understand that participating in OzCorp Industries – Kg Division training, private sessions, group classes, seminars and events is not without some risk and, although all due care is taken during training sessions, dogs are not always predictable and something unforeseen may occur. I hereby assume all risk and responsibility for myself and my dog/s while it is in my control while attending or participating in training sessions. I further agree not to hold OzCorp Industries – Kg Division liable for the actions of myself or my dogs in any way.

Signed: _____ Date: _____

Print Name: _____

(If a minor, a parent or legal guardian must sign)