Waiver of Liability & Informed Consent Release

| Name of dog(s): | |
|--|--|
| Breed/Mix: | Age: |
| workshops, facility rental, or other reconfident Canines LLC. By signing he understand that there is always som animals, especially animals with beh difficult to control and that not all do possibility of injury to myself, my do had full opportunity to discuss all co have also made all inquiries and investigations. | rself and my dog in training classes, private consultations, elated activities ("Training") offered by Eileen Koval and reunder, I certify that I have been informed and e unavoidable risk of injury involved when working with avioral issues. I acknowledge that dogs can be inherently ogs will be under control at all times resulting in the g, my family members, or third parties. Additionally, I have need to be about the foregoing risks with Eileen Koval. I estigations to my satisfaction related to such risks, mination of the training area (if applicable). |
| the Training, including, but not limite any of my family members or third p cause injury to other persons and/or | t reservation, all risks associated with my participation in ed to: the risks of any and all injuries to myself, my dog and arties who may attend, and the risks that my dog may dogs involved in the Training. I acknowledge that I, alone fly for my dog's actions during and after this training. |
| administrators, legal representatives waive, release, discharge and agree Eileen Koval and Confident Canines I claims and damages to any person o arising from the Released Party's ow | ting in the classes, I, for myself, my heirs, executors, s, successors and assigns (the "Releasing Party"), hereby not to sue and to indemnify, defend and hold harmless LC (the "Released Party") from any and all injuries, losses, r persons of any nature whatsoever, including claims in negligence, and all costs associated therewith, including cultant fees, arising from my participation in the Training. |
| I represent that I am at least 18 year | s of age. |
| Owner's printed name: | |
| Owner's signature: | Date: |