

**NOMAD
DOG INFORMATION FORM**

If you would like to attend NOMAD Practice sessions, please fill out a Dog Information form for EACH dog you wish to bring. Send completed forms to: Judy Kessler, 320 Shaker Hill Road, Starksboro, VT, 05487

NOMAD practice sessions are open to all dogs that have completed 12 weeks of agility training, or the equivalent, and have a working familiarity with all standard agility obstacles.

NOMAD MEMBERSHIP (Human's Name): : _____

Dog's Name _____ **Type/breed** _____

Age _____ **Sex** _____ **Spayed/Neutered** _____

How long has this dog been doing agility? _____

Please list the Agility classes/ experiences that this dog has participated in: _____

How would you assess this dog's mastery of the agility obstacles?

What are your ultimate training goals with this dog? _____

What are your present training issues with this dog?

Liability Waiver

I understand that there are a variety of risks to me and my dog from attending NOMAD activities. These risks include, but are not limited to: getting hit by a car, bitten by a dog, tripping and falling, spraining ankles or breaking bones. Understanding these risks, I voluntarily and knowingly waive any right I (and others on my behalf) might otherwise have to make any claim against any member or officer of Northern Magic Agility Dogs, Inc. (NOMAD) and/or any other person or entity connected with NOMAD activities (including, but not limited to, the owner or lessee of any property used by NOMAD) for any and all injuries or damage related to any NOMAD event.

Signature: _____ **Date:** _____

Printed name: _____