



P  WS BE G   D4U



Contract for Services Rendered

Service Dog Training Contract

This is a contract entered into by **Paws Be Good 4 U/Sharon Callan**
(hereinafter referred to as "the Trainer")

And

client name

(Hereinafter referred to as "the Client")

on this date, _____

date

The Provider's/Trainer's place of business is **1711 John Teem Road, Talking Rock, GA 30175**
and

The Client's place of residence is

client address.

Client phone number

The Client hereby engages the Provider to provide services described herein under "Scope and Manner of Services." The Provider hereby agrees to provide the Client with such services in exchange for consideration described herein under "Payment for Services Rendered."

Scope and Manner of Services

Services To Be Rendered By Paws Be Good 4 U:

1. Provide Shelter or Rescue Dog to be trained as a Service Dog for the client. The type of Service Dog is to be trained for mobility issues. Possibly will train to alert for high and low blood sugar. All veterinary care will be provided by Client.
2. In the event of default of this contract, this dog will be returned to Paws Be Good 4 U.
3. Six weeks of Basic Obedience Training.
Client will attend one class each week for one hour at the Paws Be Good 4 U facility.
Client will attend with dog to learn basic obedience cues.
4. Six weeks of Advanced Obedience Training.
Client will attend one class each week for one hour with dog at a location designated by Trainer to work basic obedience cues in public.
5. Client and Canine must take and pass the Canine Good Citizen Test.
Trainer will administer Canine Good Citizen Test for Client and canine.
6. Service Cue/Task Training.
Trainer will provide one class per week (one hour long) to train service cues/tasks to Client and Dog. Cues/tasks taught will be needed by Client to mitigate his or her disability. Number of sessions will depend on number of cues/tasks needed and how much the Client practices with their dog while not in training class. Estimated time will be six (6) months to eighteen (18) months for service cue/task training and public access testing. Dog must obtain 120 hours in public during training of service cues/tasks.
7. Public Access Test.
Client and Canine must pass the Public Access Test. This test will be administered by the Trainer at which time said Trainer feels Client and Canine are ready.
8. Client and Canine MUST attend one follow up course six (6) months after completion of program (Passing of Public Access Test)
9. Client and Canine MUST attend one refresher class each calendar year (1-2 hours) to verify that service dog is still performing as trained.

Payment for Services Rendered

The Client shall pay the Trainer for services rendered according to the Payment Schedule attached, within **10** calendar days of the date on any invoice for services rendered from Paws Be Good 4 U.

Should the Client fail to pay the Trainer the full amount specified in any invoice within **10** calendar days of the invoice's date, a late fee equal to **\$50.00** shall be added to the amount due and interest of **25** percent per annum shall accrue from the **10th** calendar day following the invoice's date.

Owner Responsibility

1. The Client understands and agrees that they are being trained to train their service dog.
2. The Client must practice with their service dog 7 to 12 times a week on strengthening all cues taught. The reinforcement on cues can be accomplished in approximately 15 to 30 minutes per day.
3. The Client must socialize his service dog regularly in public settings while practicing cues taught. This will be accomplished with and without trainer present.
4. The Client must complete all work/outing logs and return monthly to Trainer. Log templates will be provided by trainer.
5. The Client must complete exposure logs and return to Trainer each month. Exposure log templates will be provided by trainer..
6. The Client and Canine **MUST** pass the Canine Good Citizen Test (CGC) and Public Access Test (PAT)
7. If the Client and Canine fail to complete program through the Public Access Test (PAT), the canine must be returned to Paws Be Good 4 U and client is responsible for all training costs incurred.

I HAVE READ AND UNDERSTAND THAT ALL TRAINING IS CONTINGENT UPON THE CLIENT'S WILLINGNESS TO HANDLE AND / OR WORK WITH THEIR DOG AS DESCRIBED ABOVE

Client Signature

Date

RELEASE OF LIABILITY

I, (Client's name) _____, as the legal owner of

(Dog's name)_____do hereby waive and release Sharon Callan, CDT, ABCDT, Paws Be Good, Paws Be Good 4 U and Shelter Dogs For Veterans from any and all liabilities of any nature. This includes any injury, death, sickness or damage my pet may suffer or cause during or after any training program. I also agree to indemnify and hold harmless Sharon Callan, CDT, ABCDT, Paws Be Good, Paws Be Good 4 U and Shelter Dogs for Veterans from any and all claims due to damage the dog may cause to any family members of any third parties during or after training. The owner specifically acknowledges that they recognize the risk of taking a group class with other people and their dogs. This risk is entered into with the owner 100% responsible for their dog's behavior at all times in the class environment, public setting, at home or in anyone's home. I agree to take complete responsibility for the actions of my dog and myself, before, after and during class. At no time will the instructor of this class be liable or responsible for the actions of myself, my dog or any other person or persons who accompany me to class.

Owner's Signature

Date

PHOTOGRAPH AUTHORIZATION

I, (Client and Owner of Dog)

authorize Sharon Callan, CDT, ABCDT, DBA Paws Be Good 4 U, Paws Be Good and Shelter Dogs For Veterans to utilize any photographs taken of myself and my dog (Name of Dog)_____ for websites or advertising on any media (newspaper, flyers, business cards, websites, television, business promotions, etc.)

Owner's/Handler's Signature

Pet's Name

Date

Applicable Law

This contract shall be governed by the laws of the County of Gilmer in the State of Georgia and any applicable Federal law.

Signatures

In witness of their agreement to the terms above, the parties or their authorized agents hereby affix their signatures:

(Printed Name of Client or agent)

(Printed Name of Trainer or agent)

(Signature of Client or agent) (Date)

(Signature of Trainer or agent) (Date)



PAWS BE GOOD4U



Payment Schedule

- | | |
|--|--|
| 1. Basic Obedience Class.....6 week class | \$125.00 group class...due prior to start of class
\$150.00 private class...due prior to start of class |
| 2. Advanced Obedience Class...6 week class | \$125.00 group class.....due prior to start of class
\$125.00 private class...due prior to start of class |
| 3. Canine Good Citizen Test | \$ 25.00 due day of test |
| 4. Service Training...6-18 months | \$ 50.00 per class ...payable monthly on the first
day of each month until Training is complete. |
| 5. Public Access Test | \$ 25.00 due day of test |