



Pet Partners® Team Training Workshop



Saturday, November 21, 2009, 9:00 a.m. – 4:00 p.m.

Monadnock Humane Society Community Room

Swanzey, NH

Delta Society ® Licensed Instructor: *Lisa Karakostas*

\$75.00/person includes the evaluation on December 5

(Workshop only is \$50.00)

(Note: Animals are NOT permitted at the workshop)

**Travel directions: See the ElderPet website or contact Ameer Abel, MoTher-
appypets@gmail.com ; 603-325-2869**

Team (Animal/Handler) Evaluations

Saturday, December 5, 2009

by appointment only

Location: Bentley Commons, Keene, NH

Appointments for those attending the course and travel directions
will be given out during the class on Nov 21.

Delta Society® Licensed Evaluators: *Pat Coughlin & Lisa Karakostas*

Prior to registration please be sure to CAREFULLY read the prerequisite information on the ElderPet website. Those teams attending the evaluations will be given a 20 minute appointment. Teams should plan on being at the evaluation site for about 45 minutes.

If you sign up for the evaluation and then decide you can not make it, we kindly ask that you let us know at least two weeks in advance, as we have people on a waiting list.

If you would like more than one animal/handler team evaluated we may be able to accommodate if space allows. There is an additional \$25 fee per evaluation, however.

For questions or cancellations, contact:

Lisa Karakostas

Lkarakostas@ehr.org

ElderPet Monadnock Chapter

Pet Partners ® Team Training Workshop & Team Evaluation



REGISTRATION FORM

Please PRINT legibly

Name: _____

Address: _____

City/State/zip: _____

Phone: _____ E-mail: _____

Please Check: _____ Course only _____ Course & Team Evaluation

Animal's Name: _____

Type (circle): DOG CAT OTHER/Specify: _____

Breed: _____ Sex: _____ Neutered? _____

Age or Year Born: _____ How long lived with you? _____

Note: If evaluating more than one team, please attach a sheet with the information on that animal or handler. \$25 per additional team.

Release Form:

I indemnify and hold the Delta Society, ElderPet, and MHS harmless from and against all claims, losses, liabilities, and damage to persons or property, governmental charges or fines and attorneys' fees arising out of acts or omissions of the Pet Partners Workshop and Evaluations, including but not limited to interactions with instructors, evaluators, attendees, or animals, screening or demonstrations involving my pet, or transportation of my pet to or from the training site or within the training site.

Date: ____/____/____ Signature: _____

Amount enclosed: \$_____ Checks should be made to **ELDERPET**

Mail form with fees to: ElderPet, c/o Jeri Zezula, 26 Town Hall Rd., Madbury, NH 03823

ElderPet Monadnock Chapter
Pet Partners® Team Evaluation *Only*

REGISTRATION FORM

For those only wishing an only an evaluation. (\$25 per Team)

Please PRINT legibly

Name: _____

Address: _____

City/State/zip: _____

Phone: _____ E-mail: _____

Please Check: _____ renewal; _____ 2nd pet; _____ completed home-study

Animal's Name: _____

Type (circle): DOG CAT OTHER/Specify: _____

Breed: _____ Sex: _____ Neutered? _____

Age or Year Born: _____ How long lived with you? _____

Release Form:

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