



Pet Partners® Team Training Workshop



Saturday, October 2, 2010, 8:30 a.m. – 4:30 p.m.

242 Cole Hall, UNH, 291 Mast Rd., Durham, NH 03824

Delta Society® Licensed Instructor: *Jerilee Zezula*

\$75.00/person includes the evaluation on October 16

(Note: Animals are NOT permitted at the workshop)

Travel directions available for printing from www.elderpet.org

Team (Animal/Handler) Evaluations

Saturday, October 16, 2010

by appointment only

Cole Hall, 291 Mast Rd., Durham, NH

Appointments for those attending the course and travel directions
will be given out during the class on October 2nd.

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:

Jerilee Zezula 603-767-6856

Jerilee.zezula@unh.edu



**Pet Partners® Team Training Workshop &
Team Evaluation October 2010
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 and ElderPet 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



Pet Partners ® Team Evaluation *for Second Pet*

REGISTRATION FORM October 2010

(\$25 per Team) Please PRINT legibly

Name: _____

Address: _____

City/State/zip: _____

Phone: _____ **E-mail:** _____

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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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