



New England Pet Partners, Inc. 501c.3
*Sharing our pets to enhance
well-being and education*



Pet Partners
Sharing the *love* of therapy animals

Registration - Team Evaluation – Saturday - Date: 6-22-24

Name: _____

Organization: _____ Web site: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

Animal's Name: _____ Age, approx. DOB: _____

Animal/Species/Breed Type: _____

How Long have you had your companion? _____

CONSIDERATIONS FOR TEAM EVALUATIONS!

- ◆ Relax! Chill! Take-a-few-deep-nose-to-navel breaths to calm you and your pet
- ◆ Pets must be comfortably restrained by an appropriate collar and leash, and/or carrier, as indicated in your Pet Partner's Team Training Manual
- ◆ Bring you PP Team Handler's Course Certificate of Completion (if not a renewal)
 - If handler is under 16; parent or guardian must accompany with a signed form (Pet Partners)
 - If you are not the animal's owner/caretaker/parent, we need written permission from them
 - Handler's Questionnaire – ***Licensed Evaluator is required to review***
 - Bring Vet Wellness (Rabies) health certificate / tag
 - Towel or small blanket if animal is to be carried
 - A gentle brush or comb to which the animal is familiar and as approved by Pet Partners
 - **If** your animal has special dietary needs – bring treats

You and your companion will receive a **CONFIRMATION with TIME** when we receive the Reg. Form.

If you have questions, please Email or call.

*A Smile, a Word, a Laugh, a Deep Breath, a Hand Reaching, a Trust, a Step forward, a Sense
of Well-Being, a Small Change Makes a Big Difference ...*

Thank you for Registering with NEPP at Pet Partners.

<input type="checkbox"/> Evaluation	\$30
<input type="checkbox"/> Renewal or Re-Testing	\$25
<input type="checkbox"/> Additional animals	\$20 each

Time Preference: ☐ early morning ☐ mid-morning ☐ early afternoon ☐ late afternoon

How many evaluations? _____ Each evaluation takes approximately 30 minutes.

Evaluation times are on a first register / first serve basis. After you have completed your Pet Partner's Online Handler's Course, register online at [Pet Partners](#) for a Team Evaluation with NEPP.

Registration information is required for each animal. Organizations with multiple evaluations can use an add-on sheet with information: (Name / Pet Name / Species / Age)

Payment Method – You can pay when you arrive, cash/check/Credit Card

How You Can Help!

NEPP welcomes donations in any amount to support our teams. Visit [NEPP's website](#) for Information regarding sponsorship, events and scholarship.

Donation ☐ \$25 ☐ \$50 ☐ \$100 Other \$ _____ + Eval Fees \$ _____ = Total Submitted: _____

☐ MC ☐ VISA ☐ DISC #: _____ Exp. Date: _____ / _____

Security Code: _____ Signature: _____

- ◆ It's fine to send your Registration and Payment to:
- ◆ [New England Pet Partners, Inc.](#), P.O. Box 534, Pelham, NH 03076
- ◆ Location: [Dog Talk LLC](#) | 24 Tenney Road, Pelham, NH 03076
- ◆ E-mail: info@nepetpartners.org or neppnh@comcast.net



Terms of Agreement

I hold New England Pet Partners, Inc, Dog Talk LLC, and the sponsors of this team evaluation, harmless from and against all claims, losses, liabilities, and damage to persons or property, and attorney's fees arising from any actions at any Pet Partner's Workshops, Event, and Animal-Assisted Activity/Therapy session including, but not limited to, interactions with instructors, licensed evaluators, volunteers, attendees or animals, screening or demonstrations involving my pet, or transportation of my pet, to or from, the testing site or within the site. Please digitally sign if attaching as email (all attendees).

Signature: _____ Date: _____ / _____ / _____

Signature: _____ Date: _____ / _____ / _____

Signature: _____ Date: _____ / _____ / _____