



**Application for The Heart of Canine Water Therapy - Customized Combination Level 1 and 2  
Offered by La Paw Spa**

**Please print this form, complete, include your check/money order and send in!**  
*Please feel free to use additional paper if you would like to expand on any of your answers.*

- Yes, I would love to take this class alone as a private experience.
- I would like to share this experience with \_\_\_\_\_  
(both please fill out and print separate applications)

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Work Phone Number

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Cell Phone Number

\_\_\_\_\_  
Your Current Occupation

Male

Female

**Your Interests**

Your interest in this work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your interest/love of being in the water: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you like to give massage? \_\_\_\_\_  
\_\_\_\_\_

Do you like receiving massage? \_\_\_\_\_  
\_\_\_\_\_

Your other outside interests and hobbies: \_\_\_\_\_  
\_\_\_\_\_



## Your Inspiration

Your inspiration for becoming interested in this path of service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Your Experience

Your experience with dogs: \_\_\_\_\_  
\_\_\_\_\_

Your experience with people: \_\_\_\_\_  
\_\_\_\_\_

Do you like people? \_\_\_\_\_

The relevant classes you have taken: \_\_\_\_\_  
\_\_\_\_\_

## About You

Your physical health and condition - how much weight can you lift: \_\_\_\_\_  
\_\_\_\_\_

Any other comments or relevant information that you care to provide: \_\_\_\_\_  
\_\_\_\_\_





## Select Your Class Options for The Heart of Canine Water Therapy - Combination Level 1 and 2

Options Available (Choose ONE)	Total Price
<input type="checkbox"/> <b>The Heart of Canine Water Therapy – Customized Level 1 and 2</b> ♦ <b>Private</b> (specify date below)	\$6,000.00
<b>(Deposit must be a minimum of \$3000 which is non-refundable)</b>	<b>LESS DEPOSIT INCL:</b>
<b>NOTE: Balance must be paid at least 60 days prior to class.</b>	<b>REMAINING DUE:</b>
<input type="checkbox"/> <b>The Heart of Canine Water Therapy – Customized Level 1 and 2</b> ♦ <b>Semi-Private</b> (specify date below)	\$3,000.00
<b>(Deposit must be a minimum of \$1500 which is non-refundable)</b>	<b>LESS DEPOSIT INCL:</b>
<b>NOTE: Balance must be paid at least 60 days prior to class.</b>	<b>REMAINING DUE:</b>

Combination Level 1 and 2 will be held in Sequim, Washington. You will be responsible for all of your lodging, meals and transportation during class.

## Select Your Class Date

Please visit [www.lapawspa.com](http://www.lapawspa.com) (Training Opportunities menu item) for the latest dates and status on class availability.

\_\_\_\_\_

First Choice for Date
Second Choice for Date

## YES! SIGN ME UP!

I, the undersigned, am engaging Cindy Horsfall and La Paw Spa, LLC, for the purposes of providing me with instruction in Cindy’s experience of Canine Water Therapy. I understand that this class does not give me legal license to practice or satisfy any legal requirements of any kind. I further agree to release and hold harmless from any and all liabilities and will take these classes at my own risk. I understand that this is a release of all current and prospective claims and that I am of legal age to sign. I understand that upon receipt, Cindy will confirm availability and let me know. Should I need to cancel, I understand that all monies paid for class are non-refundable unless Cindy can fill my spot.

\_\_\_\_\_  
 Your Signature Required Date

**Please make checks payable to “La Paw Spa” and  
send completed application with your deposit to:**

**La Paw Spa Administrative Office, 325 E. Washington Street, #237, Sequim, WA 98382**