



Training Class Agreement

Puppy Foundations Level ____

6 weeks (one night per week) ♦ \$115 (includes Treats & Clicker)

Name: _____ Date: _____

Mailing Address: _____ City: _____ Zip: _____

E-mail Address 1: _____ E-mail Address 2 (optional): _____

Phone: Daytime: _____ Evening: _____ Mobile: _____

Dog's Name: _____ Breed: _____

Male **OR** Female Spayed/Neutered **OR** Intact Dog's Date of Birth: _____

Where did you get your dog: _____

How long have you had them: _____

How did you hear about this class (please be specific): _____

Please list all handlers (other than the person listed above) who will be attending class:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Things we need help with:

- Nipping
- Chewing
- Biting
- Aggression
- Jumping
- House-training
- Acclimation to collar/leash
- Crate/Kennel Training
- Shyness Fearfulness around people
- Shyness Fearfulness around dogs
- Appropriate Play Rules
- Getting Dogs Attention
- Keeping Dogs Attention
- Getting dog to play
- Interaction with other animals in house:
- Cat, dog, bird other
- _____

Things we think our dog should do, but doesn't:

- Come when called
- Sit
- Stay
- Lay on the ground
- Stay off furniture
- Stop jumping on people
- Stop rushing the door
- Stop stealing our things (socks, shoes, paper)
- Get along with other dogs
- Get along with people
- Stay out of a certain room (i.e. kitchen, den)
- Stop pulling on the leash
- Be calm in the car
- Really great tricks
- Stop driving us crazy (elaborate, please!)
- _____
- _____

Training Agreement

I/we understand that the behavior of my dog is greatly determined by my commitment to work with him/her. I/we agree to attend all classes regularly; to follow recommendations of the instructor; and to train this dog to the best of my ability. I agree to ask for clarification or help when needed.

I/we understand that this class runs for 6 consecutive weeks. **Puppy & Foundations** classes will have new students joining the class each week. My dog will have exposure to a variety of different dogs and will learn to socialize and pay attention in different scenarios. **Levels** class activities build on the previous week. If you dog it unable to participate, human participants are encouraged to attend without dogs to watch and take notes. I/we are responsible to keep my/our dog safe, be their advocate, encourage them and make learning fun.

I/we certify that this dog is current on rabies vaccination and (puppies under 6 months of age are excluded). I/we understand that in bringing my dog(s) to any area with a high volume of dog traffic I am at risk of exposing my dog(s) to infectious diseases. In an effort to protect my dog I will follow my veterinarian's vaccination recommendations. *I/we understand that I may be required to provide written proof of a relationship with my veterinarian in regard to immunizations of my dog(s.)*

I/we agree to hold harmless the Guide By Nature, Inc. DBA Pure Spirit (GBN) and Paws & Pals Premier Pet Resort (P&P), its owners, agents, employees and all persons connected or associated with these businesses and I do hereby release the same from any and all claims which I may have at any time, from the following: 1. Any loss or injury which may occur to any person or thing, and which may be caused directly or indirectly to any person or thing by an act of my dog while in or upon the premises or grounds, or in or near any entrance or exit thereto, or any function of GBN and/or P&P being held outside the GBN/P&P premises; it being my intention and agreement to assume full responsibility and liability therefore. 2. The disappearance or loss of said above named dog by theft, accident, death, or otherwise, and any damages or injury caused thereto by the negligence or carelessness of the GBN or P&P, its owners, agents, employees and all persons connected or associated with these businesses in any manner, or by any other cause operating directly or indirectly while such person or such dogs are on the premises of the GBN/P&P.

Equipment: Well-fitted flat collar with buckle or snap closure. 6 foot (1/4" – 5/8" wide) leash. Leather is preferred. Participants may also bring harnesses, head collars or other training tools they feel may be necessary, but we may not use them in class. Breeds susceptible to trachea damage should use a harness.

This dog **has/has not** attended other training. If yes, list other classes/locations/trainer: _____

Print Name: _____ **Signature:** _____

Guardian, Print & Sign (if handler is a minor): _____

Date: _____

Office Use Only

Start Date: _____ Start Day: _____

Class Start Time: _____ Amount Paid: _____ Payment Method: _____

Confirmed by: _____ on (date/time) _____

Other Information: _____

