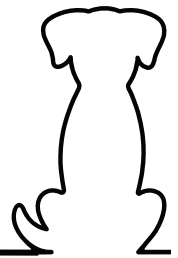


Paws 4 Success Registration Form



Payment, completed Registration, and Agreement forms are required. Admittance will not be permitted without signed agreement and adherence to its policies.

Please provide proof of vaccinations at the first Lesson.

AKC STAR Puppy AKC Canine Good Citizen Advanced Obedience Therapy Dog

Date:

OWNER INFORMATION

Name: _____ Parent/ Guardian Name: _____

Address: _____

Phone 1: _____ Phone 2: _____

Email: _____ Best Method of Contact: _____

DOG INFORMATION

Name: _____ Age: _____ Gender: Male Female

Breed: _____ Microchip: _____ Spay/Neutered: Yes No

Age Spay/Neutered: _____ List any behavioral changes after Spay/Neutered: _____

Adoption Date: _____ Previous Homes: Yes No Vaccines Current: Yes No

Date of last Vaccine: _____ Date of last Preventative Treatments: _____

Flea/Tick Treatment: _____ Heartworm Preventative: _____

Veterinarian Clinic: _____ Clinic Phone: _____

Does your dog have any medical issues, allergies, or concerns? Yes No

If yes, please explain: _____

Is your dog currently taking any medications? Yes No

If yes, please describe (include name, dosage, duration): _____

Owner Name: _____

Dog Name: _____

HOUSEHOLD AND ROUTINE

List each family member living in the home (include gender and age of children):

Briefly describe how your dog gets along with each family member including any problems:

List all other pets in household:

Briefly describe how your pets get along with each other:

Briefly describe your dogs usual daily schedule:

Where does your dog sleep?

Where does your dog sleep while you're away?

PREVIOUS TRAINING

Has your dog had previous obedience training?

Yes

No

If yes, please explain:

Does your dog know any of the following commands? (Please check all that apply)

Name Recognition

Lie Down/Down

Stay

Sit

Come

Please provide any other commonly used commands your dog may know:

Is your dog crate trained?

Yes

No

Is your dog potty/house trained?

Yes

No

What Training Methods do you use at home: (Please check all that apply)

Verbal Corrections

Physical Corrections

Treats

Praise

Clicker

What is your dogs favorite reward? (Food, affection, toys, etc)

Describe your dogs learning ability:

What are your primary training concerns?

Owner Name: _____

Dog Name: _____

We need to know your dog as well as you do! Please answer the following questions so that we have a better understanding on the behavior of your dog.

BEHAVIOR AND TEMPERAMENT

How would you rate your dogs energy level?

Low

Average

High

Excessive

Which best describes your dog? (Please check all that apply)

Submissive

Excited

Dominant

Shy

Neutral

Is your dog frightened of any certain noises or actions?

Yes

No

If yes, please explain:

Does your dog have separation anxiety?

Yes

No

If yes, please explain:

Has your dog ever bitten a person or animal:

Yes

No

If yes, please explain:

Does your dog have or shown any of the following traits? (Please check all that apply)

Digs in Yard

Jumps Fences

Excessive Barker

Growling

Excessive Chewer

Jumps on People

Play Biting

Lunging

Mouthing/Nipping

Darts/Escapes Doors

Urinates when Excited

Potties in Home

Steals Food/Trash

Doesn't Obey

Anxious

Fearful

Threatens Family

Reactive to People

Reactive to animals

Aggressive on Leash

Food Aggression

Toy/Ball Aggression

Crate Aggression

Destructive

Issues with certain Genders or Types of People. Describe: _____

What are your primary behavioral concerns?

Owner Name: _____

Dog Name: _____

Dog Training Agreement

Health/Medical: Client warrants that Dog is physically fit and in good health, and free of fleas, parasites and infectious diseases. Clients shall provide documentation of up-to-date vaccinations including Rabies, DHLPP, and Bordatella, in addition to any other vaccinations required depending on the age of the dog. Client agrees that if at any time Training Provider deems that the dog needs urgent veterinary care, Dog shall immediately be removed from training.

Training Services: Training Provider will make every reasonable effort to teach Client and Dog to perform the skills listed in the course curriculum. Training Provider will provide guidelines and rules to help the Client interact with the Dog, however, ~~Training Provider does not make any guarantee of Dog's future performance or behavior as a result of provided training, as it is the client's duty to practice and reinforce the commands taught with the Dog daily at home.~~ Client understands that without practicing and reinforcing behaviors, they will naturally become less reliable over time. Client agrees to comply with instructions, guidelines, and decisions of the Training Provider as it relates to their and their dog's ability to safely complete the program. Training Provider reserves the right to cease all activities in the interest of safety to all participants and the dogs.

Payment: In exchange for services, Client agrees to pay Training Provider \$ _____ unless other arrangements are made. Any scholarships awarded will be applied after remaining balances have been paid in full first.

Services: Training Provider will deliver _____ sessions of instruction for both the Client and their dog. Sessions will begin _____ and end _____. Any missed session are the responsibility of the Client and additional fees may be accessed.

Missed Lessons: Client agrees to give 24-hour notice in case of cancellation. If this condition is not followed, the Client agrees to pay the full amount for the session, regardless of attendance.

Termination: Training provider reserves the right to terminate this agreement at any time if the Dog injures people or other animals, or if the Training Provider deems the dog is a threat to people or other animals. Upon termination in accordance with the foregoing, Training Provider's duties shall terminate but all other provisions of this Agreement shall continue in full force and effect.

Liability: Training provider is not liable for loss or damage from disease, death, escape, theft, fire and injury to person(s), other animal(s) or property by Dog during or after the term of this agreement. Client agrees to pay resulting losses and damages suffered or incurred and to defend and indemnify Training Provider from any resulting claims, demands, lawsuits, losses costs or expenses, including attorney fees. If Dog is injured in a fight or in any other manner during or after the term of the Agreement, Client assumes the risk and agrees that Trainer should not be held responsible for any resulting injuries, losses, damages, costs or expenses. Client acknowledges that Training Provider has not represented, promised, guaranteed, or warranted that the Dog will never bite, that the dog will not be dangerous or vicious in the future, that the dog will not exhibit other behavior problems, or that the results of training will last for any particular amount of time.

Photograph Waiver: Client grants permission to Training Provider to use theirs and their pet's photograph(s) and/or video(s) taken during training sessions or events for educational and promotional purposes in any media type.

Consent To Contact: Client authorizes Training Provider to use their email and/or phone number for communication relating to programming, newsletters, and promotional information. Clients information will not be sold or given to any other organizations.

Client Signature

Date