



Referred by: _____

Training Enrollment

Classes

Puppy/Beginner		Therapy Dog		Reactive Dog Rehabilitation	
Intermediate		Tricks 101		Assistance and Service Dog	
Advanced		Tricks 201			
Advanced II		Tricks 301		Backyard Agility	
Private				Rally-Obedience	
Star Puppy		Board/Train		Specialty Class	
Canine Good Citizen		Day/Train		Other...	

Owner Info

Date: _____

Name: _____

Address: _____

City, St, Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Other Phone: _____

Email Address: _____

Dog Info

Name: _____ Breed: _____

Weight: _____ Color: _____

Age: _____ Birthday: _____ Sex: _____ Spay/Neutered? _____

Vaccines (DHPP, Bordetella, and Rabies) confirmed: Yes or No: _____ Associate Initials: _____

Veterinarian Info: Name of Dr. and Clinic: _____

Phone: _____

Temperament: _____

Behavior Problem None: _____ Biting: _____ Potty Training: _____

Jumping: _____ Chewer: _____ Other... Please List: _____

Training History: _____

Signature: _____

Date: _____