



Behavior Basics+Puppy Playtime

Thank you for your interest in Behavior Basics class with your dog. We use pet friendly training methods that help to improve communication between you and your pet. This class is appropriate for dogs and puppies who are fully vaccinated, who get along well with other dogs and people, and who either need to learn the basics for the first time, or could use a refresher course.

Children and young puppies do attend this class, and therefore this class is not appropriate for dogs who have aggression issues. If your dog has bitten, please contact us about private lessons at 678-344-2021.

Please wear sneakers or other shoes with good traction, and please bring the following to class with you:

- Dog
- Leash
- Buckle collar, head halter, sensation harness, or regular harness
- Treats
- Toys
- Crate (if possible)
- Any questions you may have

This class is 7 weeks. The cost is \$150. Payment can be made with cash or check. Payment is required to hold your space in the class and must be made in advance. Refunds are available only if you cancel 5 or more days in advance of the start of class, and only if your space is filled. We require proof of vaccination prior to the first class.

Please fill out the information below and sign; we use the information to help to customize the class to meet your needs. Please do give us your e-mail address, as this is the easiest way for the trainer to communicate with you about the class, and to answer questions between classes. You can e-mail Work+Play Positive Dog Training at info@workplaydogs.com (please add us to your address book so our e-mails aren't put into your spam folder!)



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Class meets Monday evenings at 7PM.

Name: _____

Phone Number: (h)_____ (w)_____ E-Mail: _____

Address: _____

Spouse's name: _____

Are there children in household? If yes, what are their ages? _____

Dog's Name: _____ Dog's Age: _____

Dog's Breed: _____ male or female? Is your dog intact?

Do you have any other pets? If yes, what kind of pet and how old are they?

Does your dog have any physical limitations? Yes No If yes, please describe

Has your dog ever bitten anyone (person or dog)? If yes, describe what happened and any injuries (please use the back of this paper if you need more room): _____

How did you find out about Work+Play Positive Dog Training? (If a person(s) referred you, please let us know who they are so we can thank them!)

What are your dog's five favorite things (can be food, games, activities)?

1. _____

4. _____

2. _____

5. _____

3. _____

Do you watch TV? yes no

If you have physical limitations, or are concerned that you may not be able to perform an exercise as described, our trainer will be happy to customize the exercise to accommodate your needs. Please do not hesitate to ask or to make your trainer aware of issues. If you would prefer to let the trainer know about your questions or concerns in private, please be assured that our trainer will keep your confidences confidential. The more specific you are about your abilities, the better our trainer will be able to accommodate you.



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I understand that once class begins, there are no refunds.

I understand that there are inherent risks to attending a dog training class, and that even when dogs are handled with the utmost care, there is still a risk of injury to myself, my family or guests who may attend class, and to my dog.

I hereby waive and release Work+Play Positive Dog Training LLC and Gwinnett Animal Hospital, their employees, owners, and agents from any and all liability of any nature, for any injury or damage which I or my dog may suffer, including specifically, but not limited to any injury or damage resulting from the actions of any dog. I expressly assume the risk of any such damage or injury while attending training classes at Work+Play Positive Dog Training LLC and while on the grounds of Gwinnett Animal Hospital.

I hereby agree to indemnify and hold harmless Work+Play Positive Dog Training LLC and Gwinnett Animal Hospital, their employees, owners, and agents, from any and all claims by any member of my family or any other person accompanying me to any training session or function of Work+Play Positive Dog Training LLC or while on the grounds or surrounding area thereto as a result of any action by any dog, including my own.

I understand that in some instances the class may be filmed, or photographed. I give Work+Play Positive Dog Training LLC my unrestricted permission to distribute and sell all still photographs, motion-picture film, video recordings and sound recordings taken of me in all its versions in all media throughout the world, in all publicity and advertising relating thereto, in any print publication, and in any multi-media application such as, but not limited to, the internet and CD-ROMS. I am authorized to give the same permission for my dog as well, and I give that permission. These rights are transferable to affiliates, distributors, licensees and successors of Work+Play Positive Dog Training LLC

I agree to comply with the vaccination requirements for this class. I grant permission for Work+Play Positive Dog Training LLC to obtain a copy of my pet's medical records from my veterinarian.

Name: _____

Signed: _____

Date: _____