



Registration Form for Group Training Sessions

(770) 871-8656

Name: _____ Referred By: _____

Address: _____ City: _____

State _____ Zip Code _____ Email Address: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Dog's Name: _____ Breed: _____ Dog's Birthdate: _____

Sex: Male Female Spay/Neuter? Yes No

Vet's Name: _____ Vet's Phone: (____) _____

Date of last vaccinations:

Rabies: _____ Parvo/Corona/DHP: _____ Lepto (optional): _____ Bordetella: _____

By initialing here, I attest that all required vaccinations are current and understand that by bringing my dog into a public place, I am accepting and responsible for the associated risks. _____

What problems are you currently having with your dog? (Check all that apply)

- House training
- Chewing
- Jumping Up
- Barking
- Digging
- Nipping or Biting
- Aggression toward dogs (Please describe)

- Aggression toward people (Please describe)

- Other (Please Specify)



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What other questions or problem behaviors would you like to see discussed in class?

How would you describe your dog's temperament?

***IMPORTANT** for the safety of all attendees: If you have a dog that has aggressive tendencies toward other dogs or people, please contact Laura to arrange for private training lessons or the board and train program at (770) 871-8656. Please note that dogs displaying aggression toward other class participants (human or canine) will be asked to leave class and may not return. Refunds will NOT be granted after the start of the first class session.

Group classes will meet once a week for 6 weeks for approximately 1 hour.

Class Fee: \$ _____ Start Date: _____ Location: _____

Full payment must be made before the start of the first class session by cash, check, or money order. Group training must be pre-paid, is non-transferable, and non-refundable. *A returned check fee of \$25 will be charged and added to the amount due for each returned check.*

If you are using a coupon or discount certificate, please notify Laura upon registration. Only one coupon or discount option may be used per training class registration.

Would you like to be included on our e-mail list for receipt of class information and newsletters? Yes No

Release of Liability

I, (Pet Parent's Name) _____, as the legal owner of, (Dog's Name) _____ do hereby waive and release, Laura Clawson, ABCDT from any and all liabilities of any nature. I am voluntarily participating in dog training classes and activities and I agree to take complete responsibility for the actions of my dog, and myself, before, after and during class. At no time will the instructor of this class or owner of Unleash the Pawsitive Dog Training by Laura be liable or responsible for the actions of myself, my dog or any other person who accompanies me to class.

Pet Parent's Signature: _____ Date: _____