



# Dog Training Registration Form

**TO BE FILLED OUT BY EMPLOYEE**  
Date of Class: \_\_\_\_\_  
Class Info: \_\_\_\_\_  
Date Paid: \_\_\_\_\_  
Payment Type: Cash Check CC

## Pet Parent Information:

Client Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email address: \_\_\_\_\_  
How did you hear about Simply Manners Dog Training: \_\_\_\_\_

## Pet Information:

Pet Name: \_\_\_\_\_ Pet Age: \_\_\_\_\_  
Pet Breed: \_\_\_\_\_ Sex: \_\_\_\_\_  
Is your pet Spayed/Neutered?: Yes No  
Is your pet current on vaccinations?: Yes No  
Does your pet currently go to Let's Go Canine's Daycare?: Yes No

## Class Information:

Which of the following classes would you like to register for?  
 Basic/Puppy Class - \$149     Intermediate Class - \$149     Advanced Class - \$149  
 Trick Training and Games - \$149     Private Class - \$75     Work shops - \_\_\_\_\_

## Previous Training Experience:

Have you and your dog been to an obedience class before?: Yes No

### If Yes:

Where have you taken classes previously? \_\_\_\_\_

How did your dog respond?: \_\_\_\_\_

How do you feel about that experience?: \_\_\_\_\_

What do you hope to get out of this class?: \_\_\_\_\_

### If No:

How do you expect your dog respond to training?  Be nervous  Settle in quickly

Enjoy the opportunity to be around other dogs  Learn quickly  Not Sure

Do you have any concerns for your dog attending classes? \_\_\_\_\_

## Life Experiences:

How does your dog feel about the following? (Please underline one.)

Putting on collar/leash/harness?	Loves It!	Tolerates it	Hates it
Being Hugged?	Loves It!	Tolerates it	Hates it
Being pet on the head?	Loves It!	Tolerates it	Hates it
Meeting other dogs?	Loves It!	Tolerates it	Hates it
Meeting strangers?	Loves It!	Tolerates it	Hates it
Meeting children?	Loves It!	Tolerates it	Hates it

## Your dog's personality:

How would you describe your dog's personality? (Please check all that apply.)

- Shy  Nervous  Curious  Fearful  Dependent  Friendly  Calm  Independent  
 High Energy  Low Energy  Playful  Confident  Laid Back  Quiet  Aggressive  
 Submissive  Loud  Passive  Indifferent  Other: \_\_\_\_\_

## Anything else we should know?:

Please describe any physical limitations or conditions you or your dog may have that might interfere with training or in any way limit your participation in class. \_\_\_\_\_

## What would you like to accomplish in class?:

Any specific training goals? \_\_\_\_\_

## Future Activities?:

Do you hope to participate in any of the following activities?

- Agility  Competition Obedience  Visit Nursing Homes  Therapy Dog  Flyball  
 Attend youth sports games  K9 Nosework  Visit Schools  READ Program  Show Ring  
 Other: \_\_\_\_\_

## Waiver, Agreement and Assumption of Risk:

I, the participant (identified below), for myself, my heirs, executors, administrators and assigns, hereby agree to release and hold harmless Simply Manners Dog Training and its affiliates from any actions, suits, claims, losses and demands of any kind, which I, my heirs, executors, administrators and assigns had, now have, or hereafter may have by reason of any matter arising from or in connection with my participation in the Simply Manners Dog Training Class, including without limitation any injury, accidents, death or damage to person or property.

A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which, if known by him or her must have materially affected his or her settlement with the debtor.

\_\_\_\_\_  
Name of Participant (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant