## Nemacolin Wooflands Canine Performance Training Center

 REGISTRATION FORM - SESSION XXXVII Obedience \& Agility Classes
## SEND IN YOUR REGISTRATION MATERIALS IMMEDIATELY!!

Our classes fill quickly. Delay in receipt could close you out of this session of classes. We fill on a first-come, first-served basis.

Select the class of your choice from the CLASS DESCRIPTIONS; PLEASE BE AWARE OF CLASS PRE-REQUISITES.

1. Return a completed three page Registration Form, Hold Harmless Waiver, Aggressive or Disruptive Dog Policy, Health Certificate and your $\$ 90$ registration fee. Registration fee may be submitted in the form of a check/money order (made payable to Nemacolin Wooflands) or credit card information may be provided for payment.

Remit registration form and payment to: Nemacolin Wooflands Canine Performance Training Center 3945 National Pike
Farmington, PA 15437
2. Be sure to read and sign all required documents in registration packet. Your signature indicates agreement to the "Hold Harmless" waiver as well as the "Aggressive or Disruptive Dog Policy".
3. For your convenience, a "tear-off" has been provided at the bottom of this sheet providing the dates for the entire session of classes.
4. Classes meet for 50 minutes each week for a total of 6 weeks.
5. Bring your vaccination record with you to orientation or submit it with your application. A form is included for your convenience or you may bring your own records. Your instructor must review this document PRIOR to your dog entering class.
6. Health Certificates for Beginner Classes are not required until the first class.
7. Orientation for both Puppy Kindergarten classes will be held on Monday, March 06, 2017 at 5:00 p.m.

## URGENT QUESTONS?

Contact Dolores Paroda at (724) 329-9663 or via email at paroda@stampedeindustries.com
(FOR YOUR USE-PLEASE TEAR BELOW)

| MONDAY <br> CLASSES | TUESDAY <br> CLASSES | WEDNESDAY <br> CLASSES | THURSDAY <br> CLASSES | FRIDAY <br> CLASSES |
| :---: | :---: | :---: | :---: | :---: |
| MAR 06 | MAR 07 | NO CLASSES | MAR 09 | MAR 10 |
| MAR 13 | MAR 14 | SHOW DOG | MAR 16 | MAR 17 |
| MAR 20 | MAR 21 | SHOW DOG | MAR 23 | MAR 24 |
| MAR 27 | MAR 28 | SHOW DOG | MAR 30 | MAR 31 |
| APR 03 | APR 04 | SHOW DOG | APR 06 | APR 07 |
| APR 10 | APR 11 | SHOW DOG | APR 13 | APR 14 |

# REGISTRATION FORM - SESSION XXXVII Obedience \& Agility Classes 

## ENTRY INTO A CLASS CANNOT BE GUARANTEED WITHOUT PRE-REGISTRATION. Class size is limited. Spaces are filled on a first-come, first-served basis. <br> You will be notified if you do not get your first choice of time.

## HANDLER INFORMATION

Name: $\qquad$
Address: $\qquad$ City: $\qquad$ State: $\qquad$ Zip: $\qquad$
E-Mail Address: $\qquad$
Phone (home): $\qquad$ (cell): $\qquad$ Age (if under 18): $\qquad$
Permission for text messages regarding class YES NO

DOG INFORMATION
Breed: $\qquad$ Birth date: $\qquad$ Sex: M or F Spayed/Neutered: Y N
Dog's Name: $\qquad$ Veterinarian: $\qquad$

## PAYMENT INFORMATION

I have enclosed \$90 (check method) $\square$ Check $\square$ Money Order
Or
Please charge my credit card:
Name on Card $\qquad$
Credit Card Type (circle one) VISA MasterCard AMEX Discover Credit Card \# $\qquad$
3-Digit Security Code on back of card___ Expiration Date___
Billing Zip Code $\qquad$
Signature of Cardholder $\qquad$

CLASS SELECTION (Please indicate your choice of class and time)
MONDAY
$\square$ 6:00PM to 6:50PM7:00PM to 7:50PM8:00PM to 8:50PM
Puppy Kindergarten (Star Puppy*)
THURSDAY6:00PM to 6:50PM
Agility Obed/Puppy Agility w/Karen Schelling
C.L.A.S.S.
C.L.A.S.S. (CGC*)7:00PM to 7:50PM
Agility 101/201 w/Karen Schelling
$\square$ 8:00PM to 8:50PM
Advanced Agility w/Karen Schelling**

## TUESDAY

6:00PM to 6:50PM7:15PM to 8:05PMRally Obedience
Advanced Handling w/Karen Schelling:**

FRIDAY5:00PM to 6:30PM6:30PM to 7:30PM
Agility Skills Practice
*If opting for either the Star Puppy or the CGC certification, please add \$5 per course to your registration fee.

[^0]Do you have any physical conditions that may affect your training abilities?
Yes No
If yes, please describe: $\qquad$

Does your dog have any physical conditions we should be aware of? (Food allergies, pain, special medications)
Yes No
If yes, please describe: $\qquad$

How did you acquire your dog?
Shelter/rescue program Professional breeder Pet shop Neighbor/friend
Other (Please explain) $\qquad$

How old was the dog when you acquired it? $\qquad$

How many puppies were in the litter (if known)? $\qquad$

Your dog stays mostly: Indoors Outdoors Fenced yard In a Crate Tied in yard Loose

How many hours in an average day is your dog.....
With humans? $\qquad$ Alone? $\qquad$ With other animals? $\qquad$

List your dog's favorite things:
Activities: $\qquad$
Toys: $\qquad$
People: $\qquad$
Treats: $\qquad$

Circle the words that apply to your dog:

| Fearful | Shy | Pushy | Noisy | Destructive | Energetic | Eager to please |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Happy | Friendly | Fun | Nosy | Protective | Greedy |  |

How does you dog react to the following?
Men $\qquad$ Women $\qquad$
Strangers $\qquad$
Puppies $\qquad$
Adult Dogs $\qquad$

What is it that you like most about your dog?

Can you take things away from your dog? YES NO
Explain if necessary: $\qquad$

Will your dog get down from the couch or bed if asked? YES NO

What is your dog doing that upsets you? $\qquad$
$\qquad$

How would you like your dog to act? $\qquad$

What commands does your dog respond to? Circle all that apply:

| Come | Don't Jump | Down | Drop It |  | Enough | Fetch | Give | Heel | Up | In |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Leave It | Let's Go | Move | Okay |  | Sit | Stand | Stop It | Take It | Wait | Stay |
| How often will your dog come when called? |  |  |  |  |  |  |  |  |  |  |
| 100\% 75\% 50\% 25\% 0\% |  |  |  |  |  |  |  |  |  |  |
| Have you previously attended dog training classes: YES NO |  |  |  |  |  |  |  |  |  |  |
| If yes, where? |  |  |  |  |  |  |  |  |  |  |

What did you enjoy or dislike about your previous class? $\qquad$
$\qquad$

List titles earned by your dog: $\qquad$
$\qquad$
$\qquad$

What do you hope to accomplish by the end of class? $\qquad$

Nemacolin Wooflands Canine Performance Training Center HEALTH CERTIFICATE FOR TRAINING CLASSES

NAME OF DOG: $\qquad$
BREED: $\qquad$ AGE:

NAME OF OWNER: $\qquad$

VACCINATION RECORD SHOWING DATES OF MOST RECENT BOOSTER(S)

## DHLPP (REQuired)

Puppies under 6 months of age: (record dates)
DHLPP \#1 $\qquad$ DHLPP \#2 $\qquad$ DHLPP \#3 $\qquad$

## BORDATELLA (RECOMMENDED)

Not applicable if puppy is under 4 months of age
BORDATELLA Given $\qquad$

RABIES (REQUIRED)
Not applicable if puppy is under 3 months of age
RABIES Given $\qquad$

## OTHER HEALTH DATA

## DATE AND RESULTS OF MOST CURRENT FECAL CHECK

## HEARTWORM PREVENTATIVE (RECOMmended)

Name of product used $\qquad$
$\qquad$
$\qquad$

# Nemacolin Wooflands Pet Resort \& Spa <br> Agreement to Hold Harmless, Waiver and Assumption of Risk 

I understand that attendance of a canine performance training class such as dog obedience, conformation, or agility training class is not without risk to myself, members of my family or guests who may attend, or my dog, because some of the dogs to which I will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care.

I hereby waive and release Nemacolin Wooflands Pet Resort \& Spa LLC. hereinafter referred to as the Wooflands, its employees, officers, members, and agents from any and all liability of any nature, or injury or damage which I or my dog may suffer, including specifically, but without limitation, any injury or damage resulting from the action of any dog, and I expressly assume the risk of such damage or injury while attending any training session, or any other function, of Wooflands or while on the grounds or the surrounding area thereto.

In consideration of, and as inducement to the acceptance of my application for training by Wooflands, I hereby agree to indemnify and hold harmless Wooflands, its employees, members and agents from any and all claims, or claims by any member of my family or any person accompanying me to any training session or function of Wooflands or while on the grounds or the surrounding areas as a result of any action of any dog, including my own.

Name of Owner:
Address:
City: $\qquad$ State: $\qquad$ Zip: $\qquad$
Signature of owner:
(If a minor, Parent or Guardian must sign)
Date: $\qquad$

## Nemacolin Wooflands Canine Performance Training Center <br> Aggressive or Disruptive Dog Policy

Any dog that exhibits unsafe or disruptive behavior toward other dogs, handlers, or instructors must be immediately brought to the attention of the Wooflands Manager. A further evaluation of the dog's behavior will be performed, and if it is determined that the dog will not benefit from the group class situation or poses a safety problem, the dog will be dismissed from class. If the dog has caused injury to another dog or person they shall be dismissed from class immediately. A partial refund will be given to the handler along with information on contacting a private behaviorist, if available.

I understand the above policy and agree with any decision regarding my dog's aggressive or disruptive behavior.
Name of Owner:
Address:
City: $\qquad$ State:
Zip:
Signature of owner:
(If a minor, Parent or Guardian must sign)
Date: $\qquad$


[^0]:    ** $\$ 120 /$ session and if opting for Advanced Agility students must be approved by Instructor before first class

