



**Nemacolin Wooflands Canine Performance Training Center**

## **PUPPY TRAINING REGISTRATION FORM**

### **6-Week Session | Thursdays, July 13 - August 24, 2017**

**PLEASE SEND IN YOUR REGISTRATION MATERIALS AS SOON AS POSSIBLE**

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

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 Pet Resort & Spa) 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 are not required until the first class.

#### **URGENT QUESTIONS?**

Please contact Nemacolin Wooflands Pet Resort & Spa daily between 8:00 am and 6:00 pm at 724.329.9663.

**(FOR YOUR USE-PLEASE TEAR BELOW)**

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## **PUPPY TRAINING DATES**

### **6-Week Session | Thursdays, July 13 - August 24, 2017**

THURSDAY, JULY 13, 2017	THURSDAY, JULY 20, 2017	THURSDAY, JULY 27, 2017	THURSDAY, AUGUST 3, 2017	THURSDAY, AUGUST 10, 2017	THURSDAY, AUGUST 17, 2017
6:30 pm	6:30 pm	6:30 pm	6:30 pm	6:30 pm	6:30 pm

# PUPPY TRAINING REGISTRATION FORM

## 6-Week Session | Thursdays, July 13 - August 24, 2017

ENTRY INTO A CLASS CANNOT BE GUARANTEED WITHOUT PRE-REGISTRATION.

Class size is limited. Spaces are filled on a first-come, first-served basis.

You will be notified if you do not get your first choice of time.

### HANDLER INFORMATION

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

### DOG INFORMATION

Breed: \_\_\_\_\_ Birth date: \_\_\_\_\_ Sex:    M or F    Spayed/Neutered: Y    N  
Dog's Name: \_\_\_\_\_ Veterinarian: \_\_\_\_\_

### PAYMENT INFORMATION

*Nemacolin Wooflands Pet Resort & Spa accepts checks, money orders or credit cards at payment.*

For credit card payments, please contact Nemacolin Wooflands Pet Resort & Spa between 8:00 am - 6:00 pm at 724.329.9663.

Checks or money orders can be made out to **Nemacolin Wooflands Pet Resort & Spa**.

*Please continue onto next pages...*

**Do you have any physical conditions that may affect your training abilities?**

Yes      No

If yes, please describe: \_\_\_\_\_

**Does your dog have any physical conditions we should be aware of?** (Food allergies, pain, special medications)

Yes      No

If yes, please describe: \_\_\_\_\_

**How did you acquire your dog?**

Shelter/rescue program      Professional breeder      Pet shop      Neighbor/friend

Other (Please explain) \_\_\_\_\_

**How old was the dog when you acquired it?** \_\_\_\_\_

**How many puppies were in the litter (if known)?** \_\_\_\_\_

**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? \_\_\_\_\_ Alone? \_\_\_\_\_ With other animals? \_\_\_\_\_

**List your dog's favorite things:**

Activities: \_\_\_\_\_

Toys: \_\_\_\_\_

People: \_\_\_\_\_

Treats: \_\_\_\_\_

**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 your dog react to the following?**

Men \_\_\_\_\_

Women \_\_\_\_\_

Children \_\_\_\_\_

Strangers \_\_\_\_\_

Crowds \_\_\_\_\_

Puppies \_\_\_\_\_

Adult Dogs \_\_\_\_\_

What is it that you like most about your dog? \_\_\_\_\_

\_\_\_\_\_

Can you take things away from your dog?    YES    NO

Explain if necessary: \_\_\_\_\_

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

What is your dog doing that upsets you? \_\_\_\_\_

\_\_\_\_\_

How would you like your dog to act? \_\_\_\_\_

\_\_\_\_\_

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

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

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? \_\_\_\_\_

\_\_\_\_\_

List titles earned by your dog: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_



**Nemacolin Wooflands Canine Performance Training Center**

**HEALTH CERTIFICATE FOR TRAINING CLASSES**

NAME OF DOG: \_\_\_\_\_

BREED: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME OF OWNER: \_\_\_\_\_

**VACCINATION RECORD SHOWING DATES OF MOST RECENT BOOSTER(S)**

**DHLPP (REQUIRED)**

Puppies under 6 months of age: (record dates)

DHLPP #1 \_\_\_\_\_ DHLPP #2 \_\_\_\_\_ DHLPP #3 \_\_\_\_\_

**BORDATELLA (RECOMMENDED)**

Not applicable if puppy is under 4 months of age

BORDATELLA Given \_\_\_\_\_

**RABIES (REQUIRED)**

Not applicable if puppy is under 3 months of age

RABIES Given \_\_\_\_\_

**OTHER HEALTH DATA**

**DATE AND RESULTS OF MOST CURRENT FECAL CHECK**

**HEARTWORM PREVENTATIVE (RECOMMENDED)**

Name of product used \_\_\_\_\_

VETERINARIAN: \_\_\_\_\_

DATE: \_\_\_\_\_

# Nemacolin Wooflands Pet Resort & Spa

## 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: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature of owner: \_\_\_\_\_

(If a minor, Parent or Guardian must sign)

Date: \_\_\_\_\_

## Nemacolin Wooflands Canine Performance Training Center

### 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: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature of owner: \_\_\_\_\_

(If a minor, Parent or Guardian must sign)

Date: \_\_\_\_\_