

Dear Great Dog Owner:

Thank you for making the commitment to train your dog!

Please bring the following items to class:

1. One willing owner/handler wearing flat safe shoes and clothing with pockets or a waist pack, in which to keep treats.
2. One dog.
3. One baggie full of small soft food treats (cut up hot dogs, cheese, etc.).
4. Your dog's favorite toy (other than yourself!)
5. One six foot leash, a leather leash is best, chain leashes are strongly discouraged, FLEXI-LEASHES ARE NOT ALLOWED.
6. One buckle collar, cloth martingale collar, sensation harness or head collar.
7. A few baggies to pick-up after your dog.
8. Vaccination records. **Puppies should have had their second Parvo vaccination within two weeks of beginning class, or have completed their third set of shots.**

The first class will begin_____.

Please bring all of the above so you can participate fully. Please wear sturdy, flat shoes and clothes that you don't mind getting a bit doggie. Please postpone that lovely glass of wine or chilly beer until AFTER dog class. Alcohol and dog training don't mix well

We will meet at **South Bark Dog Wash, 2037 30th Street. Class will meet for one hour for 6 weeks. The fee is _____.** To secure a place for you and your dog in our class, please send the enclosed form and a check, made out to **Kate Palese or K8's Gr8 K9s** to the above address. If time does not permit pre-registering just bring the check and forms to the first day of class. You will be added if space permits. Please call 619-232-7387 if your plans for participation in this class change or if you have any questions.

Thank you,
Kate Palese

Class _____

SOUTH BARK DOG WASH
2037 30TH ST
619-232-7387
Southbark.com

Kate Palese
K8's Gr8 K9s
619-299=9010

CLASS TYPE	TODAYS DATE	PAYMENT TYPE
A/P/G/T/CGC/Pre		ck/cg/ca

Name	Dog's Name
Address	Breed
City/Zip	Age Spay/Neutered?
Phone	Veterinarian
Email	Names for certificate

Please fill out the information requested below. If you have any further comments please use the back of this form. Thank you.

How many people in your household? _____ Children (Ages): _____

Other pets in your household? (Type and ages) _____

Where did you get your dog? _____ How long ago: _____

General health of the dog: _____

If you or the dog have a physical limitation, please explain. _____

Where is your dog during the day? _____ Where does your dog sleep? _____

Where is your dog fed? _____ What brand of dog food do you use? _____

How often is your dog exercised? _____

Have you attended an obedience class with any dog before? _____ When/Where: _____

What did you like/dislike most about that class? _____

What do you want to accomplish in this class? _____

Other goals for this dog: _____

What do you like best about this dog? _____

What do like least about this dog? _____

List dog's favorite activities/toys/games/person: _____

Check the behaviors which apply to your dog.

Not housetrained	Jumps up	Pushy	Dominant
Chews	Unruly	Shy	Attacks dogs
Barks	Doesn't obey	Defensive	Attacks people
Digs	Runs away	Fearful	Bites
Howls	Chases	Anxious	Fights
Mouthy	Eats stool	Separation anxiety	Escapes
Food aggressive	Eats junk	Demanding	Destructive

South Bark Dog Wash and K'8 Gr8 K9s
2037 30th San Diego
619-232-7387

Release from Liability

I _____ hereby acknowledge that I choose to work with, and around, untrained dogs. Recognizing the inherent risks in dog training, I will not hold Kate Palese, K8's Gr8 K9s, or South Bark Dog Wash responsible should an accident occur prior to, during, or following, dog training classes. I also recognize that dog training requires a certain amount of physical activity and that I have voluntarily chosen to participate in this activity.

Signed: _____

Date: _____

Signed: _____

Date: _____