

Justin's Canine Campus
Obedience Class Registration Form

Owner's Information:

Name: _____

Address: _____ City: _____

Cell: _____ Email: _____

Pet Information:

Dog's Name: _____ Male / Female Breed: _____

Date of Birth: _____ Spayed/Neutered? Yes _____ No _____

Known fears, behavioral, or medical concerns: _____

Has your dog been socialized with other dogs? Yes _____ No _____

Does your dog display nervous or aggressive behavior towards strangers? Yes _____ No _____

If yes, please explain: _____

Have you received training somewhere else; if so, where and when? _____

What are your goals for training? _____

Please mark the class time you are interested in attending:

Sundays 9:30-10:30am Sundays 10:45-11:45am Sundays 12:00-1:00pm

Mondays 6:15-7:15pm Tuesdays 6:15-7:15pm

How did you hear about us? Referral _____ Referral's Name _____

Website _____ Social Media _____ Advertisement _____ Please describe where _____

All dogs must be up-to-date with age appropriate vaccinations (Rabies, Distemper and Bordetella) and be free from any fecal parasites that could pose a health risk to other dogs. Spaying/neutering is not required for training; please notify us if you have a female in heat so that we can plan accordingly.

Payment is due at the first session and is non-refundable even if you miss a class or do not complete the course.