**RiverRun Dog Training**

**910-483-9213**

**STOP – before filling out this registration form and submitting it please make sure you plan to attend. Do not submit this form unless you plan to attend and pay for this class. Our classes are small and we do not overbook. By turning in this form you are committing to paying for this course whether you show up or not.**

Type of class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_starting date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dog's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dog's age:\_\_\_\_\_

Describe your dog's personality:

\_\_\_\_\_\_\_\_\_stubborn \_\_\_\_\_\_\_\_\_ Laid-back \_\_\_\_\_\_\_\_shy/timed

\_\_\_\_\_\_\_\_\_excitable\_\_\_\_\_\_\_\_\_\_\_nervous \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ responsive

\_\_\_\_\_\_\_\_\_aggressive

I have the following problems with my dog:

\_\_\_\_\_\_\_ pulls on leash \_\_\_\_\_Will not walk on leash \_\_\_\_\_\_\_\_\_\_ begging

\_\_\_\_\_\_\_\_runs away \_\_\_\_\_\_will not come when called \_\_\_\_\_barks to much

\_\_\_\_dislikes strangers \_\_\_\_\_ growls at people \_\_\_\_\_\_\_\_ chews destructively

\_\_\_\_\_\_\_jumps on people \_\_\_\_\_\_\_\_nips and mouths in play\_\_\_\_ not housebroken

My dog is afraid of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a specific problem you would like to correct during this class?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any other information that would be helpful in training your dog \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you find out about River Run Obedience Classes? If you heard about us from a veterinarian clinic please state which clinic? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please PRINT your name and your dog's name the way you would like it to appear on your

graduation certificate.

Your name: ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dog's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE BRING A COPY OF YOU R DOG’S SHOT RECORD TO THE FIRST NIGHT OF CLASS.