



Dog Training Classes - Registration Form

Class Start Date: \_\_\_\_\_

Class Start Time: \_\_\_\_\_ am \_\_\_ pm

I wish to enter my dog in a training course conducted by Wiggles-n-Wags Dog Training, Inc. at the Wiggles-n-Wags Dog Training Facility located at 216 E. St. Charles Rd. Lombard, IL 60148. ▪ 630.832.3001 ▪ susan@wiggles-n-wags.com.

Please Check one: Note: A \$60.00 deposit is required to hold your place in class

- Checkboxes for Puppy Class, Family Dog, Agility, Rally-O, Click Your Heels, Private Lesson, Behavioral Consultation, Other: \_\_\_\_\_

Owner's Name \_\_\_\_\_ Owner's Age (if less than 18): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Neutered? \_\_\_ Yes \_\_\_ No

Where did you get your dog? \_\_\_\_\_ Breed(s): \_\_\_\_\_

Who is your Veterinarian? \_\_\_\_\_ Weight: \_\_\_\_\_ Vaccinations Current? \_\_\_\_\_

Please list dog's previous training: \_\_\_\_\_

How did you hear of this class and /or the Facility? (Please be specific): \_\_\_\_\_

Continue below for all classes except Agility, Rally, and Competitive Obedience -----

Please check current problems:

- Checkboxes for Barks, Bites people, Runs off, Chews, Fights other dogs, Mouths, Shy, Digs, House soils, Jumps on people, Won't come when called, Pulls on leash

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

List in the order of importance the three behaviors that you would most:

Like your dog to learn during training:

Like to teach your dog not to do:

- Numbered lists for behaviors to learn and not to do

WnW Use only -----

Accepted \_\_\_ / \_\_\_ / \_\_\_ By: \_\_\_\_\_ Fee collected \$: \_\_\_\_\_ Cash: \_\_\_\_\_ Check No: \_\_\_\_\_ Bal. Due: \_\_\_\_\_

CC Appl #: \_\_\_\_\_ v \_\_\_ mc - \_\_\_ Waiver on file - Returned checks subject to 25.00 fee.