



# DOG TRAINING REGISTRATION & QUESTIONNAIRE

Please fill in or check off the appropriate information.

- CLASSES**
- Puppy
  - Basic
  - Intermediate
  - Riverside Animal

- PRIVATE**
- Puppy Head Start
  - Private Lesson
  - Adopt/Purchase Eval.
  - Test Only

- PRIVATE**
- Personal Shopper
  - Pre-Purchase
  - Four Lesson Package

Date of 1<sup>st</sup> Lesson/Class: \_\_\_/\_\_\_/\_\_\_ Day of the Week: \_\_\_\_\_ Location: \_\_\_\_\_

How did you hear about Big Sky Dog Training? \_\_\_\_\_

**Please complete the following:**

Owner's/Handler's Name: \_\_\_\_\_ (Must be over 18 years old)

Other members coming to class: \_\_\_\_\_

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

Primary Phone: \_\_\_\_\_ Other Ph: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Breed: \_\_\_\_\_

How long have you owned your dog? \_\_\_\_\_ Purchase or Rescue? \_\_\_\_\_ Male or Female

Name of Dog Food you are feeding your dog/puppy? \_\_\_\_\_

**REFUND POLICY/CANCELLATION POLICY:**

**PRIVATE LESSONS:** IF A NO-SHOW OR CANCELLATION IS MADE IN LESS THAN 12 HOURS FROM THE SERVICE DATE, A \$50.00 WILL BE ASSESSED. LESSON PACKAGES MUST BE USED WITHIN TWO MONTHS OF PURCHASE. A REFUND FOR THE ENTIRE AMOUNT IS ONLY HONORED IF REQUESTED WITHIN 24 HOURS OF THE AGREEMENT AND PAYMENT. OUR POLICY IS TO ALLOW A MAXIMUM OF ONE-HALF OF THE UNUSED REFUND.

**LIABILITY WAIVER FOR DOG SERVICES:**

I UNDERSTAND THAT MY PARTICIPATION IN ANY OF BIG SKY DOG TRAINING SERVICES (HEREBY REFERRED TO AS TRAINING) INCLUDES AN ELEMENT OF RISK FOR ME, ATTENDING FAMILY MEMBERS, GUESTS, AND MY DOG, WHICH INCLUDES, WITHOUT LIMITATION, RISKS OF ILLNESS, FALLS, BITES AND INJURY THROUGH CONTACT WITH OTHER PARTICIPANTS, THEIR DOGS, OR INTERIOR/EXTERIOR SURROUNDINGS OF ANY FACILITY WHERE DOG TRAINING TAKES PLACE. I UNDERSTAND THAT PARTICIPATION BY ME, ATTENDING FAMILY MEMBERS/GUESTS, AND MY DOG IS VOLUNTARY AND THAT EACH PERSON HEREBY EXPRESSLY AGREES TO HOLD BIG SKY DOG TRAINING, ITS EMPLOYEES, OWNERS, AND AGENTS, HARMLESS FROM ANY LIABILITY WHATSOEVER RESULTING FROM ANY INJURIES OR DAMAGES SUSTAINED AS A RESULT OF PARTICIPATION IN THE TRAINING. I, AND ATTENDING FAMILY MEMBERS/GUESTS, INDIVIDUALLY AND ON BEHALF OF THEIR RESPECTIVE HEIRS, ASSIGNS, OR SUCCESSORS, HEREBY EXPRESSLY WAIVE, RELEASE, AND DISCHARGE BIG SKY DOG TRAINING, ITS EMPLOYEES, OWNERS, AND AGENTS FROM ANY CLAIMS, DEMANDS, INJURIES, DAMAGES OR CAUSES OF ACTION THAT ARE IN ANY WAY RELATED TO PARTICIPATING IN THE TRAINING. BIG SKY DOG TRAINING MAKES NO REPRESENTATIONS, GUARANTEES, OR PROMISES, IMPLIED OR EXPRESSED, THAT ANY TRAINING RECEIVED FROM BIG SKY DOG TRAINING WILL CURE A DOG OF ANY DANGEROUS PROPENSITIES. IT IS UNDERSTOOD THAT REGARDLESS OF THE DOG TRAINING THE ANIMAL RECEIVES, A DOG ALWAYS HAS THE PROPENSITY TO BITE. I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS BIG SKY DOG TRAINING, ITS EMPLOYEES, OWNERS, AND AGENTS FROM ANY CLAIMS OR CLAIMS BY ANY MEMBER OF MY FAMILY OR ANY OTHER PERSON WHILE ON THE GROUND OF ANY FACILITY WHERE DOG TRAINING TAKES PLACE, THE SURROUNDING AREA THERETO, OR ON MY OWN PROPERTY OR PUBLIC AREA AS A RESULT OF ANY ACTION BY ANY DOG, INCLUDING MY OWN. I AFFIRM AND HAVE PROOF THAT MY DOG IS CURRENT ON ALL VACCINATIONS APPROPRIATE FOR MY DOG'S AGE AND AS REQUIRED TO ATTEND TRAINING. I AGREE TO ABIDE BY ALL RULES PRESENTED DURING THE TRAINING. I ALSO UNDERSTAND THAT BIG SKY DOG TRAINING MAY USE PUBLICITY AND PICTURES OF MY DOG OR ME FOR PROMOTIONAL PURPOSES WITHOUT LIABILITY OR OBLIGATION TO ME. I ALSO AGREE TO REIMBURSE MONTANA C. HAYES FOR ANY EXPENSES DUE TO INJURIES OR ILLNESSES SHE MIGHT SUSTAIN FROM WORKING WITH MY DOG.

I HAVE READ, UNDERSTAND, AND AGREE TO ALL TERMS AND CONDITIONS SET FORTH ABOVE and choose to take this lesson/class.

\_\_\_\_\_  
SIGNATURE OF OWNER OR RESPONSIBLE AGENT FOR PET

\_\_\_\_\_  
DATE

CHECK HERE TO CONFIRM THAT YOU ARE THE PERSON WHOSE NAME WAS ENTERED ABOVE AND YOUR PET'S OWNER OR RESPONSIBLE AGENT.

| FOR OFFICE USE ONLY   | DATE RECEIVED | DATE VERIFIED | NOTES |
|-----------------------|---------------|---------------|-------|
| REGISTRATION          |               |               |       |
| PROOF OF VACCINATIONS |               |               |       |

Please check off (✓) any area you are having **PROBLEMS** with.

|   |  |
|---|--|
| <p><b>Adult or Puppy Training</b></p> <p>House training _____</p> <p>Biting/Nipping hands _____</p> <p>Bites leg pants _____</p> <p>Attention &amp; focus _____</p> <p>Licking _____</p> <p>Chewing _____</p> <p>Digging _____</p> <p>Drop it _____</p> <p>Leave it _____</p> <p>Traveling in car _____</p> <p>Jumping out of Car _____</p> <p>Excessive barking _____</p> <p>Boundaries/ Bolting _____</p> <p>Car Sickness _____</p> <p>Wild Dog Behavior _____</p> <p>Resource Guarding _____</p> | <p><b>Obedience</b></p> <p>Recall (come/here (on-leash) _____</p> <p>Recall (come/here off lead) _____</p> <p>Stay _____</p> <p>Sit / Sit stay _____</p> <p>Down / Down Stay _____</p> <p>Wait _____</p> <p>Walking on leash _____</p> <p>Pulling on leash _____</p> <p>Come off leash _____</p> <p>Running away _____</p> <p>Excitement _____</p> <p>Jumping fences _____</p> <p>Jumping up on furniture _____</p> <p>Jumping up on people _____</p> <p>Kitchen counter surfing _____</p> <p>Chasing cars, bicycles, etc. _____</p> |
| <p><b>Socialization and Comfort</b></p> <p>Dog shy _____</p> <p>General aggression _____</p> <p>Fear aggression _____</p> <p>Threat &amp; Alarm _____</p> <p>Growling _____</p> <p>Dog socialization _____</p> <p>People socialization _____</p> <p>Strange places _____</p> <p>Separation anxiety _____</p> <p>General anxiety _____</p> <p>Excessive barking _____</p> <p>Pack orientation _____</p> <p>Phobic Behavior _____</p> <p>Introduce the dog to baby _____</p>                          | <p><b>Grooming</b></p> <p>Bath &amp; conditioner _____</p> <p>Brushing teeth _____</p> <p>Nails _____</p> <p>Teeth problems _____</p> <p>Eyes &amp; Ears _____</p> <p>Skin itching/irritation _____</p> <p>Dry skin _____</p> <p>Anal glands _____</p> <p>Lumps/bumps _____</p> <p>Fleas / Ticks _____</p> <p>Spay/Neuter _____</p> <p>Heartworm testing/prevention _____</p>  |
| <p><b>Food and Treats</b></p> <p>Passing Gas _____</p> <p>Upset stomach _____</p> <p>Skin itching/irritation _____</p> <p>Food Allergy _____</p> <p>Eating stools _____</p> <p>Resource Guarding food/toys/treats _____</p>   | <p><b>Name &amp; Phone of your Veterinarian:</b></p> <p>_____</p> <p>_____</p>   |

**Additional Comments/areas to work on:**