Dog Obedience Group, LLC 1943 W. Estes Ave. Chicago, IL 60626-2319 773-973-2934

www.dogobediencegroup.com

Enclosed you will find the registration information you requested for **the Dog Obedience Group's S.T.A.R. Puppy Training** class at Rex's Place Dog Day Care / Dog Obedience Group Training facility, 2120 Ashland in Evanston. Instructors for this class are Wendy DeCarlo-Young, Sam Young and Dennis Damon. Please fill out the registration forms and return them along with the class fee and a copy of your puppy's immunization record. When we receive your forms and payment, we will pre-register you to assure your place in class. Email directly to: wendy@dogobediencegroup.com or mail to the address on the form.

Class begins on Saturday, October 7, 2017, 9:00-10:00 a.m. Puppies attend all class sessions with their owners. Please bring your puppy on a well fitted buckle/snap & lock collar or harness and 6' leash. You will need a variety of soft treats (freeze dried liver, jerky, hotdogs, cheese, anything your puppy likes), a treat pouch or apron, towel or mat and clean up materials - plastic bags, paper towels just in case! Supplies are available for purchase.

Directions: From the intersection of Green Bay Road and Simpson (Walgreen's on the corner) go west onto Simpson. The first side street is Ashland turn right (north). Rex's Place is on the west side of the street. Parking is available on Simpson, Ashland and Payne Streets. There is a public parking lot in the block north of our facility directly across the street from Suds Car Wash.

After you review the enclosed information, if you have further questions please feel free to call me directly at 773-973-2934.

Sincerely,

Wendy DeCarlo-Young Training Director

Dog Obedience Group 1943 W. Estes Ave. Chicago, IL 60626-2319 Phone: 773-973-2934

dogobediencegroup.com

Dog Obedience Group – Training Class Registration Form

Name Eric Dudek	Date 9/15/17							
Address1890 Maple Ave Apt 614E	City	Chicago	Zip	60201				
Home Phone N/A Day Phone	N/A	Cell l	Phone(734)	474-5338				
E-mail edudek1@gmail.com		Fax #	N/A					
Dog's Name <u>Desmond</u> Sex <u>Male</u>	Age _	5.5 months B	Breed(s) <u>Gold</u>	en Retriever				
How did you hear about Dog Obedience Group classes? Please	be spec	ific <u>Internet Sear</u>	ch					
Release - As owner/handler of the dog (or the owner/handler's legal guardian), I hereby release and save harmless Rex's Place, Dog Obedience Group, LLC, all employees, all independent contractors, all volunteers, and all persons connected therewith from any and all claims, lawsuits, liens and liabilities of every nature which may arise from my or my dog's participation in class, or my or my dog's arrival and departure to and from class, or on the premises where the training class occurs, and, as owner/handler of the dog (or owner/handler's legal guardian) I assume full responsibility for my or my dog's actions and the consequences thereof through the entire course of instruction. This release extends and applies to, and also covers and includes, all unknown, unforeseen, unanticipated and unsuspected injuries, damages, losses and								
liabilities as well as any consequences thereof. If this application is accepted, it is understood that I may be dropped from the class at the discretion of the instructor. No dogs in heat allowed. No refunds.								
I have read this release, understood its terms and conditions, and by signing this release agree to be bound by its terms and conditions.								
Date 9/15/17 Signed Eric Dudek	.							
Method of Payment:Check <u>Yes</u> Cash	_MC	Visa	Disc	over				
Total Amount <u>\$90.00</u> Card# <u>4147202292033147</u>	CV	VV_522	Exp. Date	01/22				
Card Holder SignatureEric Dudek		Billing Zi	p Code602	201				

Make checks payable to D.O.G. Registering via email/fax, your email/facsimile signature shall substitute for and have the same legal effect as an original signature. Proof of vaccination must accompany this registration. Registrations can be emailed directly to wendy@dogobediencegroup.com

PUPPY CLASS STUDENT PROFILE

Attendance: 1 2 3 4	5	6 Class I	_ocation:			
OWNER				Age		
OCCUPATION	HOME PHONE					
WORK PHONE		FAX #	E-MAI	L		
ADDRESS		CITY		ZIP+4		
PUPPY'S NAME	_ AGE	BREE	ED(S)	SEX		
NEUTERED/SPAYED?	_	FIRST PUPPY SHOTS?				
NAME OF VET/CLINIC						
HOW DID YOU HEAR OF THIS CLASS?	(be spec	cific)				
List other family members including pets:						
If you or your puppy have a physical limit	ation (ha	ındicap) pleas	e explain on ba	ck:		
Pup was acquired from (source):				At age:		
Have you attended an obedience class b	efore? _					
Where/When:						
What did you like/dislike about class?						
List in order of importance, the three beh Your puppy to learn, during training: 1		To tea 1 2	ch your puppy ı	not to do:		
What did you like about them?						
What did you <u>like least</u> about them	?					
What do you like best about this p	uppy? _					
What concerns you most about your related	tionship \	with this puppy	/?			
List pup's favorite activities/toys/games/p	erson: _					
List pup's <u>least</u> favorite activities/toys/gar	mes/pers	on:				
Signature		Date				

Use back for additional comments. Thanks!