

Please complete and return to an Instructor, at Orientation.

DOG's Name: \_\_\_\_\_

Name: \_\_\_\_\_

Dog's breed/mix: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Household members: # adults \_\_\_\_\_, #children 13 and older \_\_\_\_\_, # children under 13 \_\_\_\_\_

Are there other animals in your home besides this dog? If so, what are they and how old?

\_\_\_\_\_

Do you live in (circle one): Apartment, Townhouse, Single family home, Other? \_\_\_\_\_

Exercise for your dog (circle all that apply): Have fenced yard, go to dog park, go for leashed walks, Dog Sports \_\_\_\_\_, Other? \_\_\_\_\_

Have you attended obedience classes previously? (Y/N) If so, with this dog or different one? Where, if not with DOTC? \_\_\_\_\_

Do you or the dog have a physical limitation that we need to know about? (Y/N). \_\_\_\_\_

**TELL US ABOUT YOUR DOG(s)**

	Dog 1		Dog 2	
Call Name				
Age				
Sex	Male	Female	Male	Female
Spayed/Neutered?	Yes	No	Yes	No
Breed/ Type				
Rabies Tag #				
Rabies Exp. Date				

When and where did you get this dog? \_\_\_\_\_

Has the dog had previous training? If so, where? \_\_\_\_\_

How would you describe your dog? \_\_\_\_\_

Is there anything in particular you would like to learn in this class? \_\_\_\_\_

Are there any current "issues" you are having with your dog? \_\_\_\_\_