

Your Name _____

Address _____

Phone (day) _____

Phone (cell) _____

Phone (evening) _____

Email _____

Would you like to be put on our mailing list for future events? _____

Class Date _____

Dog's Name _____

Breed/size _____

Dog's Birthday _____

Sex _____ neutered/spayed

How old was he/she when you got him/her? _____

From whom did you get your dog? Rescue, friend, etc. _____

Who is your vet? _____

Are there children in the home _____

Ages _____

Do you own any other pets/

types _____

How does your dog react with other dogs and strangers _____

What are your goals _____

Who else will be working the dog? _____

Do they understand your goals _____

What is stopping you from achieving your goals _____

What methods have you used _____

To what degree were they successful? _____

What problems are you encountering at this time? Please be specific _____

Where does your dog sleep? _____

Where and when does he eat? _____

What **brand** of food do you feed? _____

www.dogfoodadviser.com

What percentage of time is your dog

Outside _____

Inside _____

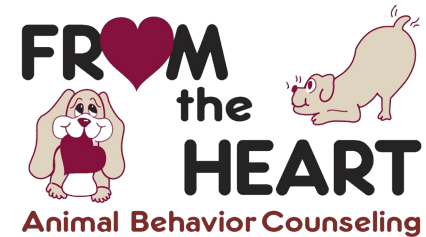
Alone _____

What else would you like to say about your dog? Medical problems? _____

I like to thank people that refer to us, were you referred? By whom? _____

Are you a previous client? _____

If so, thank you for trusting us with your next dog!





Mailing:

P. O. Box 3734

Salinas, CA 93912-3734

Training center:

561-I Brunken Ave.

Salinas, CA 93901

Card number

Exp. date

Cardholder's name

CCV

Billing zip

Signature

"You become responsible, forever,
for what have you tamed"

~~Antoine de Saint-Exupery

"Respect your pet: Train without pain"

RELEASE AND WAIVER OF LIABILITY AND ASSUMPTION OF RISK

From the Heart Dog Training LLC, is a training and daycare facility, as such I, _____, understand I am taking certain risks of damage or injury to myself or my dog(s) by participating in training, seminars, events or daycare environment. I will hold harmless From the Heart Dog Training LLC facility, Marci Enterprises, its staff, guest lecturers, their staff or other participant for any damage or injury to person or property, including death or serious injury which may occur as a result while I and my dog(s) on the premises of From the Heart Dog Training Center.

No refunds will be issued after class begins.

I am eighteen (18) years old or older and have the legal capacity to enter into a binding contract.

I have read, understand and agree to abide by the terms and conditions set forth in the above release in its entirety. I also understand that the management of From the Heart Dog Training LLC reserves the right to alter or amend the rules at any time without prior notice. I understand, if my dog(s) is/are not appropriate in the setting I may be asked to remove them or confine them.

Signature

Date

Staff

Date