



Puppy Class Information

FVDTTC is proud to offer classes for owners of new puppies. We feel that what your puppy learns during the first few months of its life is extremely important to a long and happy life with you and your family. The puppy class is designed to help you learn about your puppy and help your puppy learn about you. Puppies eligible for this class must be between 8 weeks and 5 months old. We limit the puppy class size so that each puppy and owner will be able to get more individualized attention.

We will help you learn about your puppy's behavior, and how to care for it. We also help you to begin teaching your dog household manners such as walking on a loose leash, not jumping on you, and beginning to come when called. At the end of the session, we feel your puppy will be ready to move into our beginning obedience class, if you want to continue working with your dog.

The next several pages include all the information you need to enroll and to prepare for class. You will find:

1. **The Class Enrollment form.**

- a. Please complete the form and sent it, along with your fee, in quickly to guarantee your place in class.
- b. Applications are accepted on a first come, first serve basis. Once a class is full, there will be no exceptions. This allows the instructors to provide each person with some individualized attention.
- c. **The fee for the 8-week session is \$95.00 for a non-member and \$20.00 for a member and must be paid in full before the session begins to guarantee your place in class.**

2. **Health Certificate.**

- a. Health certificates must be completed by your veterinarian and brought to the first night of class.
- b. We suggest you do the stool check as soon as possible in case your dog needs treatment for parasites. This is very common in puppies and we want to make sure you are ready when class starts.

If you decide that you do not wish to continue in your class, you **MUST** notify the Class Registrar listed below, or the Primary Instructor (if you know that information), before the beginning of the second class (this is the first night that the dogs attend class), in order to receive a full refund. Refunds will not be given once the second class has begun.

Visitors are always welcome.

Class Registrar: Sally Boeke
37 Sherwick Rd
Oswego, IL 60543

registration@fvdtc.org

Thank You,

From everyone at FVDTTC, we want to make training a pleasant experience for you and your dog.

Fox Valley Dog Training Club, Inc.

Puppy Class Application for 2018

Please Choose Your Class:

- | | | | |
|--|---------------------------------------|---|--|
| <input type="checkbox"/> JANUARY 4 7:00pm | <input type="checkbox"/> APRIL 26 8pm | <input type="checkbox"/> AUGUST 9 7pm | <input type="checkbox"/> NOVEMBER 29 8pm |
| <input type="checkbox"/> FEBRUARY 8 8:00pm | <input type="checkbox"/> MAY 31 7pm | <input type="checkbox"/> SEPTEMBER 13 8pm | |
| <input type="checkbox"/> MARCH 22 7:00pm | <input type="checkbox"/> JULY 5 8pm | <input type="checkbox"/> OCTOBER 25 7pm | |

(Class scheduling is done on a First Come - First Served basis. Please return application as soon as possible.)

Owner's Information:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Dog Handler Name: _____

Dog's Information:

Name: _____ Birthday or Age: _____

Breed: _____

Where did you hear about us? FVDTC Website _____ Vet _____ A Friend _____ Other _____

Tell us about your concerns, problems, or goals: _____

Hold Harmless Clause – Please Read:

I hereby agree to hold harmless Fox Valley Dog Training Club, Inc., its officers, directors, agents and employees from any and all claims, causes of action, and suits occurring and resulting from any damages, injury or loss to any person or persons including all persons to whom trainers or members may be liable under any workmen's compensation law or other law and from any loss, damage, cause of action, claim or suits from damage, including by not limited to loss of property, or dogs, caused by arising out of, or in any way connected with the exercise by the trainer or members of the club or the privileges herein granted. I also understand and agree that while on the training premises: I am responsible at all times for the behavior of my dog. Children under the age of 16 MUST be under the direct supervision of a responsible adult at all times. The Director of Training, his/her designated representative has the right to remove any dog or handler from the training premises at any time.

Signature: _____

(Applicant)

(Parent or Guardian if under 18)

Return this completed application and a check payable to FVDTC (\$95 non-member, \$20 member) to:

FVDTC
c/o Sally Boeke
37 Sherwick Rd
Oswego, IL 60543

Class scheduling is done on a First Come - First Served basis. Please return application as soon as possible. Bring completed health forms to the first night of class.



Fox Valley Dog Training Club, Inc. Puppy Health Certificate

Please bring this completed Health Certificate with you on the first night of class, prior to your dog's attendance at training.

Owner's Name: _____
Dog's Name: _____
Dog's Breed: _____
Dog's Birthday or Age: _____

Please have the following section completed by your Veterinarian.

Veterinarian's Signature: _____
Veterinarian Clinic Name: _____
Clinic Phone Number: _____
Date: _____

Please list the dates for the following vaccines and/or tests, as appropriate for the puppy's age:

Bordetella	_____	Distemper (or Titer)	_____
Heartworm	_____	Parvovirus (or Titer)	_____
Rabies	_____		

Fox Valley Dog Training Club requires that your dog has a stool sample tested within the 30-day period PRIOR to your class starting.

We encourage you get the stool check as early as possible within the 30-day time frame in the event that your dog needs treatment for parasites. This gives you time for the treatment to take affect; and possibly allows you to get a negative stool check. In order to come into the class, your dog will need a negative stool check.

Fecal Examination Results: _____
Fecal Examination Date: _____