

## NAPA VALLEY DOG TRAINING CLUB, INC.

## **Training Class Application**

Class: (Please indicate class name) Time: (Please select time and indicate AM or PM) Day: (Please indicate day of week) \_\_\_

# ALL FEES ARE NON-REFUNDABLE.

A COPY OF CURRENT SHOT RECORDS

A \$35 NSF FEE WILL BE RETURNED C		(DHPP & RABIES) MUST BE INCLUDED WITH THIS APPLICATION & PAYMENT.				
NAME:		P	HONE: (	_)		
ADDRESS:		C	XITY		_ZIP:	
DOG'S NAME	YOUR E-MA	IL				-
BREED OF DOG:	D	OG'S SEX:_		DOG'S A	4GE:	
WHERE DID YOU GET YOUR HOW LONG HAVE YOU HAD T YOUR VETERINARIAN'S NAM	HIS DOG?					Other
HAS YOUR DOG EVER BITTE HOW DID YOU HEAR ABOUT	N OR TRIED TO BITE? (	(Circle One)	Animal F	Person	Both N	Neither
	lld you like to receive e special NVDTC events				-	
I agree to hold the Napa Valle Business/Operations, and the harmless from any claim for loany person or thing by the act grounds or near any entrance from any claim for loss or damotherwise, whether such loss, caused by the negligence of a	Members, Governors, oss or injury which may of this dog, myself or may thereto, and I personal nage to me, my guests of disappearance, theft, in	Officers and be alleged to be this dog be alleged.	Employees of havebeen of thile in or upon the aforesty disappearant or damage be	of the afo caused di n the trai mention nce, thef e caused	rementior irectly or in ining premed ed parties t, injury, d	ndirectly to nises or harmless eath or
Handler's Signature			Date_			
Second Person's Name (Printe	d)					
Second Person's Signature			Dat	e		
DO NOT	WRITE IN THIS B	OX- FOR	CLUB US	SE ONL	_Y	
SHOT RECORDS: D	HPP:	R	ABIES:			
Amt in Vouchers (if eligible) :	Amt in Cash:			Pro	cessed by	
Amt by Check: Check	# Amt in Disco	ounts (if eligibl	le):			

NOTES:

## **NVDTC Student Information**

Your input helps us better understand how we can best help YOU and YOUR DOG.

Your NameN	lame of Class
Dog's Name	
How long have you owned your dog?	
How many and what type of other pets do you currently have?	
Are there any concerns about your or another family member's relation	onship with this dog?
Does your dog have any physical limitations / medical problems?	'es No If yes, please explain:
How does your dog act with other dogs she / he does not know?	
How does your dog react to strangers?	
Has your dog ever been in a dog fight &/or bitten a person or another	dog? Yes No
If yes, please explain:	
Have you attended training classes before with this dog? Yes N	No If yes, when and where:
What do you want to accomplish from THIS training class?	
What are your long term goals for your dog? What activities would yo	u like to do with your dog?
(i.e., Having the perfect companion dog, Obedience / Rally, Tracking,	Agility, Freestyle / Dog Dancing, Animal-Assisted Therapy)
What do you find the most CHALLENGING about your dog?	
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Include any questions, concerns or additional details about you and/or your dog .



#### NAPA VALLEY DOG TRAINING CLUB, INC. 68 Coombs Street, Napa, CA 707-253-8666

#### Session 3 Starts the week of April 21st through May 31st, 2025.

Click here for class descriptions: http://www.nvdtc.org/class-descriptions/

Puppy – Dogs 12 weeks to 6 months old	Fee \$150.00/6 weeks
☐ 5 pm Wed.	
Adolescent – Dogs 6 months to 1 year	Fee \$150.00/6 weeks
☐ 11 am Wed. ☐ 6 pm Wed.	
Good Manners 1 - Dogs completing adol, or over 1 year of age	Fee \$150.00/6 weeks
☐ 10 am Wed. ☐ 7 pm Wed.	
Good Manners 2 – Dogs completing GM1 or has had some training	g Fee \$150.00/6 weeks
☐ 11 am Tues. ☐ 6 pm Fri.	
Mighty Mights (GM1) – for dogs under 30 pounds	Fee \$150.00/6 weeks
☐ 11 am Sat.	
Canine Good Citizen Class and Evaluation	Fee \$150.00/6 weeks
☐ 7 pm Tues.	
Strengthening the Basics – see class description for information	Fee \$150.00/6 weeks
☐ 1:30 Wed. ☐ 10 am Sat.	
Delightful Distractions – see class description for information	Fee \$150.00/6 weeks
☐ 2:30 pm Wed. ☐ Noon Sat.	
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Owner/Handler: Date	e:
Phone #:	
Email:	
Dogs Name:	
Dogs Age:	
Dogs Breed:	