Pawsitive Training by Lisa

ENROLLMENT FORM

Home Address:		
Contact Phone Numbers	Mobile:	Home: Daytime:
		Email:
Vet Name:		Vet Phone:
Breed:		
Gender:	M / F Age: _	Neutered/Spayed: Y / N
	Check all be	elow that apply to your pet.
□ nervous / anxious		□ calm / passive
□ very excitable or excited		□ loves all adults
☐ lunges or growls at strangers		□ loves all children
☐ shies away from or avoids ch	ildren	☐ likes strangers inside the home
☐ shies away from or avoids str	rangers	$\hfill \square$ likes strangers outside the home
☐ lunges or growls at other do	gs	□ plays well with other dogs
□ wants to chase cats, squirrels	s, birds etc	$\hfill\Box$ plays well with cats and other small animals
☐ hates to be in a kennel/crate/	/pen	\square happy to be in kennel/crate/pen
☐ runs out open doors		□ stays/waits at open doors
☐ growls/snarls at you or family☐ chases cars, bikes, skateboa		□ always comes when called
□ barks excessively		□ aggressive around food dish/treats/bones/toys
□ barks out window		\square begs or whines for food
□ barks at night		☐ growls when touched or pet
□ barks or cries when left alone	9	□ escapes yard / house
☐ jumps on you and family		□ jumps on everyone
☐ likes to dig		□ chews on or otherwise destroys your property
☐ likes to chew bones		☐ sniffs or eats food on counter or table
□ constantly needs to chew		□ behaves for vet and groomer
Is your pet housebroken? If no	ot, how often do they go	o in the house per day?
Has a human ever been bitten	by your pet? How mar	ny incidents have there been? (Please attach detailed explanation)
Has another dog or animal eve	r been bitten by your p	et? How many incidents have there been? (Please attach detailed explanation)
Does your pet have any medic	al issues or allergies? (F	Please attach detailed explanation)
Do you feel your pet needs a n	nuzzle? If so, please ex	xplain.
	gned waiver. f detailed information on etailing my dogs aggres:	above listed problems. sive/biting/attacks on human or animals. o address that I did not see listed above.

I understand and agree that Pawsitive Training by Lisa LLC ("PTBL") shall not be liable for any injury or damage to any person, animal, or property which results from the training or behavior of my pet. I also understand and agree that any child under the age of 18 must be accompanied by an adult. I understand that I do have the option of signing the "Minor Child Waiver" below permitting my child (or children) under the age of 18 to attend pet education classes or private training without an adult family member present. I further agree that PTBL and its employees and independent contractors shall not be held liable for any costs or expenses, including necessary medical expenses, incurred as a result of my pets participation in the program, whether or not same may have been caused by the ordinary negligence or omission of PTBL and its employees and independent contractors. I understand that I will be liable for any damages my pet may do to other pets or people. PTBL reserves the right to refuse or terminate training services of any pet at any time.

I understand that for the safety of all pets, proof of current vaccinations must be presented at the first class in order to participate.

Date:

Minor Child Waiver		
family member present. I further agree the held liable for any costs or expenses incu	w to attend dog training classes or private training without an adult PTBL, its employees and independent contractors shall not be red as a result of my pets participation in the program while and that I will be held solely responsible for any damages my pet mpanied by my minor child (children).	
Child's Name:	Birth Date:	
Child's Name:	Birth Date:	
Child's Name:	Birth Date:	
Sign:	Date:	

Sign: