STEFANIE KITCHER - 314.570.3894 POOCHYSMOOCHES.COM ANGELA STRUCKHOFF - 636.239.0610 K9KUTSWASHMO.COM

| OWNER INFORMATION                       |                         |                    |                                   |                        |               |
|---|-------------------------|--------------------|-----------------------------------|------------------------|---------------|
| OWNER NAME:                             |                         |                    | E-MAIL:                           |                        |               |
| PHONE:                                  | TEXT? 🗆 YES             | □ NO               | HOW LONG HAVE YOU OWNED THIS DOG? |                        |               |
| K-9 INFORMATION                         |                         |                    |                                   |                        |               |
| NAME:                                   |                         |                    |                                   | MALE [                 | □ FEMALE □    |
| BREED:                                  |                         | PUREBRED           | MIXED BREED □                     | DESIGNER BREED □       |               |
| AGE:                                    |                         | BIRTH DATE:        |                                   |                        |               |
| INTACT ☐ SPAYED/NEUTERED ☐              | AGE OF DOG AT           | TIME OF SPAY/NI    | EUTER:                            |                        |               |
| HOME ENVIRONMENT & HISTORY:             |                         |                    |                                   |                        |               |
| TELL US A LITTLE ABOUT YOUR DOG, HI     | S HISTORY, PERSONA      | LITY. PERSONAL C   | UIRKS. ETC                        |                        |               |
|   |                         |                    | (0                                |                        |               |
|   |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
| HEALTH:                                 |                         |                    |                                   |                        |               |
| PLEASE PROVIDE A COPY OF YOUR DO        | GS CURRENT VACCIN       | NATION RECORDS     | (DIGITAL COPIES MAY               | BE EMAILED)            |               |
| • FOOD ALLERGIES:                       |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
| • HEALTH CONDITIONS:                    |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
|   |                         |                    |                                   |                        |               |
| • PHYSICAL LIMITATIONS:                 |                         |                    |                                   |                        |               |
| EMEDICENCY.                             |                         |                    |                                   |                        |               |
| EMERGENCY:                              | WOLLD VOLLLIVE HE       | TO CONTACT IF V    | NE CAN NOT DEACH V                | OH                     |               |
| IN THE EVENT OF AN EMERGENCY WHO        |                         |                    |                                   |                        |               |
| NAME:                                   |                         |                    |                                   |                        |               |
| VETERINARIAN:                           |                         |                    | PHON                              | VE:                    |               |
| NOTE:                                   |                         |                    |                                   |                        |               |
| In the event that you, your emergency   | r contact or vour veter | rinarian can not h | ne reached during an              | emergency we will take | take vour dog |
| to the veterinarian of our choosing. Pl | •                       |                    | -                                 |                        | -             |
| We will make our best judgmet decision  | -                       |                    | _                                 | _                      |               |
| you prior to making any decisions abo   |                         |                    |                                   | _                      |               |
|   | _                       |                    |                                   | ·                      |               |

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| <ul> <li>INTERACTS WELL WITH NEW DOGS ☐ YES ☐ NO ☐ SOMETIMES ☐ MOST OF THE TIME ☐ UNPREDICTABLE ☐ I DON'T KNOW This does not include dogs within the same home or dogs that they know and see often.</li> <li>LOVES TO PLAY BUT</li></ul>   |
|---|
| TOLERATES OTHER DOGS BUT DOES NOT ENJOY PLAY  |
| BEHAVIOR CHALLENGES:  |
| LIST ANY PROBLEM AREAS, IF ANY, THAT YOU WOULD LIKE WORKED ON:  |
| 1   |
| 2   |
| 3   |
| <ul> <li>□ Resourse Guarding (guards or protects food, toys or other possesions including owners)</li> <li>□ My dog has bitten, or tried to bite other dogs or people</li> <li>IF YOUR DOG HAS BITTEN OR TRIED TO BITE PEOPLE OR OTHER DOGS IN THE PAST, WE WILL NEED TO EVALUATE HIM PRIOR TO REGISTRATION.</li> </ul> |
| TRAINING GOALS: PLEASE LIST ANY GOALS YOU HAVE FOR YOUR DOGS TRAINING.  1   |
| 2   |
| 3   |
| 4   |
| 5   |
| 6   |
| 7   |
| ADDITIONAL NOTES:   |
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### WHAT TO EXPECT FROM YOUR TRAINING

#### **STAY & TRAIN TRAINING PROGRAMS:**

Training Programs that allow you the convenience of leaving your dog to be trained by a trainer can have quite a few benefits to both you and your dog. Besides the sheer convenience, your dog gets the benefit of working with a professional trainer one on one, as well as having the benefit of learning in a controlled environment.

However, one of the challenges of having your dog trained by someone other than yourself is that in order for your dog to perform for you as well as they do the trainer, you will need to schedule training sessions that do include you. In-home training fees start at \$60 per session, please contact Stefanie for exact cost and to schedule your apointment.

Dogs are associative learners, this means that they learn to perform a skill based on everything and everyone around them and within the environment. Because dogs are assoicative learners they do not generalize behaviors the way humans do. This simply means that what they learn in one place or situation may not be retained in a new place or situation.

This being said, there are many of benefits to stay & train programs that outweigh any pitfalls. One of them being the speed and procision at which your dog will learn from a professional trainer.

Part of getting the most out of your training is to understand that because of poor generalizing of behaviors, skills that your dog is taught at the training facility must also be taught at home and in any other location where the dog may need to perform that skill. These skills must be taught exactly as they are in the training facility, using the same verbal cues, body language and reward system.

Changes in the dogs training environment must be done on a gradual basis, if changes are made to quickly the dog may revert back and become confused. Be sure to train at home in a space that has as few distractions as possible at first, and increase the level of distractions as your dog lets you know he is ready. This means that the dog park is likely not the place to start your training.

Thank you for choosing PS K-9 Academy and K-9 Kuts & Kennels for your training, grooming & boarding needs.

We are happy to help you in any way we can. Please dont hesitate to contact us with any questions or concerns you may have.

Stefanie Kitcher - Owner - PS K-9 Academy Angela Struckhoff - Owner - K-9 Kuts & Kennels

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### **RELEASE, HOLD HARMLESS, ASSUMPTION OF RISK & WAIVER**

I hereby acknowledge that I have voluntarily applied to participate in dog training activities with Poochy Smooches (or any of its sub entities or sponsors) or Stefanie Kitcher. I am aware that there are inherent risks and hazards involved with dogs, and with being around dogs, and in using and being around dog equipment and I am voluntarily participating in dog training activities with the knowledge of these potential dangers. I am not relying on Stefanie Kitcher or any other agent, instructor, assistant, or other participant, facility owner, program sponsor or anyone else, to prevent such occurrences. In order to participate in Poochy Smooches training classes instructed by Stefanie Kitcher, demonstrations, or other activities, I, being fully informed of such risks and hazards, agree to assume all risk of such occurrences.

I hereby waive any and all claims or actions I or my guardians, representatives or assigns may have against Poochy Smooches (or any of its sub entities or sponsors), Stefanie Kitcher and any other agent, instructor, assistant, or other participant, facility owner, program sponsor from all liability of any nature, including but not limited to any and all personal injuries to myself, my dog(s), children in my charge, or harm to property, caused directly or indirectly by any acts that might occur in conjunction with dog training classes, demonstrations, or other activities. I also agree to assume sole responsibility and liability for any injury or damage caused by myself, children in my charge, or any dog I own or handle during participation in Poochy Smooches (or any of its sub entities or sponsors) classes, events and activities. I also agree to indemnify, defend, and hold harmless Poochy Smooches (or any of its sub entities), Stefanie Kitcher and any other agent, instructor, assistant, or other participant, facility owner, program sponsor from any injury, damage, loss, liability, or expense, including legal costs and attorneys fees, which results from damages caused by myself, children in my charge, or any dog(s) I own or handle. The undersigned, individually and for his or her heirs, personal representatives, successors and assigns, further agrees not to sue Poochy Smooches (or any of its sub entities or sponsors), Stefanie Kitcher and any other agent, instructor, assistant, or other participant, facility owner, program sponsor as a result of any loss suffered in conjunction with dog training classes, demonstrations, or other activities.

**RELEASE OF LIABILITY** -- I have carefully read this Release, Hold Harmless, Assumption of Risk, and Waiver of Liability, and fully understand the contents thereof. I am aware that this is a release of liability and a contract between Poochy Smooches Dog Training (Stefanie Kitcher) and me, and I agree to all terms and conditions, of my own free will. The terms and conditions of this agreement bind the parties for the current period of training, and for all subsequent classes, demonstrations, events or other activities in which they hereafter participate, unless expressly revoked by any party in writing.

WHAT TO EXPECT FROM MY DOGS TRAINING -- I have read and understand the information given to me about how the training program works. I understand that I will need to schedule In-home training so that I can learn how to work with my dog and his new training. In-home training fees start at \$60 per session, with a possible mileage fee.

**EMERGENCY CARE** -- In the event that you, your emergency contact or your veterinarian can not be reached during an emergency, we will take take your dog to the veterinarian of our choosing. Please be advised that you will be responsible for any and all veterinary costs incurred. In addition. We will make our best judgmet decision in regard to your dogs care if you are unable to be reached. We will make every effort to reach you prior to making any decisions about your dogs emergency care.

| Owner Printed Name: |       |  |
|---------------------|-------|--|
|                     |       |  |
| Owner Signature:    | Date: |  |