

**Arcadia Working Dogs
Funky Town K9 Academy, LLC**

Client Information Form

Name of Handler: _____

Cell phone: _____ email: _____

Address: _____

Name of dog: _____ Breed: _____

Previous herding experience: _____

What do you want to get out of your work here? What are your goals for your dog?

Human health/ physical concerns that might interfere or need accommodation?

Dog health/ physical concerns that might interfere or need accommodation?