Bels Dog Training

Training Contract

Trainer: Eisa’Bel Curran Owner/founder

Service you are interested in:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Proof of vaccines must be turned into trainer 24 hours prior to start of training\*

Owner Information

First and Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_ Postal code:\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alt#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other household pets (include breed/species, age, gender, if spayed/neutered):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any health issues of Pets:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Dog Information

Dog Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age:\_\_\_\_\_\_\_\_\_\_ Coat Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that apply:

Male\_\_\_\_ Neutered\_\_\_\_\_ Intact\_\_\_\_\_

Female\_\_\_\_ Spayed\_\_\_\_\_\_ Intact\_\_\_\_\_\_

Age when dog was acquired:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Where did dog come from:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that apply:

Sleeps outdoors\_\_\_\_ Sleeps indoors\_\_\_\_\_ Sleeps in crate/kennel\_\_\_\_\_ House broken\_\_\_\_\_\_

Crate/kennel trained\_\_\_\_\_\_ Yard Fenced\_\_\_\_\_\_ AKC registered\_\_\_\_\_\_\_ CKC registered\_\_\_\_\_\_

UKC registered\_\_\_\_\_\_\_ Any titles the dog has earned? If yes please list\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Vaccine Status

Please list the dates when they are due

Rabies\_\_\_\_\_\_\_ DHPP or DA2PP (Distemper, adenovirus/hepatitis, Parainfluenza, Parvovirus)\_\_\_\_\_\_\_\_\_\_\_\_ Leptospirosis\_\_\_\_\_\_\_\_\_ Bordetella (kennel cough)\_\_\_\_\_\_\_\_\_

Other VX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical conditions

Current Veterinarian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_

Medical conditions:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current medications\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Diet (food brand)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How often is the dog fed?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that applies

When around other dogs they are: Shy\_\_\_\_Nervous\_\_\_\_Excited\_\_\_\_Neutral\_\_\_\_Aggressive\_\_\_\_Dog selective\_\_\_\_

When around other people they are:

Shy\_\_\_\_\_Nervous\_\_\_\_Excited\_\_\_\_Neutral\_\_\_\_Aggressive\_\_\_\_\_Human selective\_\_\_\_\_

Does your dog have a bite history? If yes please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Training Goals

Goals or concerns:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Age when problem started:\_\_\_\_\_\_\_\_\_\_\_ Any triggers pinpoint when behavior starts:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dog already knows (please select all that applies, knows behavior without food bribery, leash use, and will promptly perform after you say it once)

Sit\_\_\_\_ Down (lay down)\_\_\_\_\_ Stay\_\_\_\_\_ Recall\_\_\_\_\_\_ Leash walking\_\_\_\_\_\_ Leave it\_\_\_\_\_\_Place\_\_\_\_\_\_Break command\_\_\_\_Heel\_\_\_\_\_\_Marker word or sound\_\_\_\_\_\_

Is the dog resource aggressive? If yes please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the dog had any formal training\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Training equipment used (leashes, different types of collars)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notes:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bels Dog Training will work diligently to assist pet owners in their efforts to achieve the desired behaviors for each pet. We can only train, coach and assist behavioral change in limited time. By signing below, I hereby agree to release, discharge and/or hold Bels Dog Training and/or their associates harmless from any and all claims, causes of action or demands by any reason of the use of facilities, and/or participation of programs sponsored by Bels Dog Training.

Owner signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

