

## **APPLICATION INSTRUCTIONS:**

### **Private Sessions:**

- Please print and complete the Application for Private Sessions form prior to your first session.
- Payment is accepted by check or cash only.

### **Group Classes:**

Caryl-Rose Pofcher teaches group classes:

- In Northampton, through The Collared Scholar. For schedules and registration information for those classes, click <http://collaredscholar.com> or call 413-587-9475 or email [info@collaredscholar.com](mailto:info@collaredscholar.com) . Pre-registration is required through THE COLLARED SCHOLAR for their orientation and classes.
- In Hadley, through Dakin Pioneer Valley Humane Society. For schedules and registration information for those classes, click <http://dpvhs.org/training/training.php> or call 413-781-4000 ext: 129 or email [jhaleyrose@dpvhs.org](mailto:jhaleyrose@dpvhs.org). Pre-registration is required through DAKIN for their orientation and classes.

- 🐾 Canine Manners
- 🐾 Puppy Training
- 🐾 Behavioral Training
- 🐾 Private Sessions
- 🐾 Day Training

# APPLICATION FOR PRIVATE SESSIONS

**My Dog, LLC**

413-256-3647 (DOGS)  
[mydogtraining@aol.com](mailto:mydogtraining@aol.com)  
[www.mydogtraining.net](http://www.mydogtraining.net)  
 Amherst, MA area

1<sup>ST</sup> Session (date & time): \_\_\_\_\_ Location: \_\_\_\_\_

Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone Number: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

How did you hear about My Dog, LLC? \_\_\_\_\_

**🐾Pet Information🐾**

Name: \_\_\_\_\_ Breed (s): \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Spayed? /Neutered?  Yes  No

How long have you had your dog? \_\_\_\_\_

Does your dog have any physical limitations or conditions that would prevent your dog from safely participating in normal canine activities? If so, please explain: \_\_\_\_\_

Does the owner or handler have any physical limitations I should be aware of? If so, please explain: \_\_\_\_\_

Why did you choose this dog? \_\_\_\_\_

Have you trained dogs before? If so, what type of training? \_\_\_\_\_

Why did you decide to seek private sessions and what are your goals? \_\_\_\_\_

Please list any specific issues you are having with your dog: \_\_\_\_\_

Please state whether your dog has ever exhibited any aggressive behavior towards people, dogs or other animals, and if yes, explain fully \_\_\_\_\_

Additional information My Dog, LLC should know \_\_\_\_\_

There shall be no refunds of any amounts paid to My Dog, LLC. The undersigned, on behalf of himself/herself, on behalf of any and all other owners, and on behalf of any and all participants authorized or permitted by the undersigned to attend sessions, agrees to defend, indemnify and hold harmless My Dog, LLC, its staff, volunteers, owners, and agents from all liability and damages, including, without limitation, liability and damages, for any claim, loss or injury which may occur or may be alleged to have occurred to any persons, animals, or property arising from or related to the training or classes.

I hereby certify that the entered/registered dog is not a hazard to persons, dogs, other animals or property and that the entered dog's rabies and other vaccinations are current in accordance with the requirement(s) of the state in which the dog resides.

\_\_\_\_\_  
 Signature Date

**Mail with payment to: My Dog, LLC, 76 Memorial Drive, Amherst, MA 01002**