



Home Basics: Level Two (training to Off Leash)



Application: Please READ all Directions carefully

REGULATIONS: In this six-week class the training progresses through off-leash control. Handler must be at least 13 yrs. old. **ONE** person trains the dog throughout the class. See website map for location/directions.

*Home Basics Level One: Class is a mandatory pre-requisite for dog & handler. The first lesson of this class meets **WITH DOGS**.

Handler must have completed a Home basics class with a dog. Keeping current with the class work is the responsibility of the handler. If an absence is unavoidable, optional private make up lessons are available at additional cost.

REGISTRATION: *Classes fill early!* PREREGISTRATION is by MAIL only. See map for directions.

★ The class fee may be partially transferrable to a later class but will not be refunded after the first class. Please complete the application legibly, sign the agreement, and mail early with **\$155.00** fee. Make check payable to: **MARY MAZZERI**

Mail to: 136 Golfview Lane Carpentersville, IL 60110 Questions? [847] 426-5089

➔ Date Class starts: _____ MON TUES WED THURS SAT at _____ a.m. p.m. ←

Name of your last class instructor _____ Last class/date completed with this dog _____

By signing and submitting this application I agree to all the regulations and terms of registration. I assume full responsibility for any incident that may occur and indemnify and hold harmless Care Dog Training, Mary Mazzeri, agents, instructors and property owners. I have read and agree to all regulations and conditions of registration.

Signature: _____ Dated _____

(Must be signed and dated by handler or legal guardian if a minor handler.)

Please type or print legibly, thank you.

HANDLER (Person training dog) _____

PHONE (Home) _____ (Work) _____

Email _____

ADDRESS _____ CITY _____ ZIP _____

DOG'S NAME _____ BORN _____

BREED (S) _____ SEX: M F NEUTER/SPAY?

☆ Please indicate any problems your dog is still having.

Does your dog have any health issues? No ___ Yes ___ Is it taking any medications? If yes, please explain

Your goals for this class: _____

Co Founder International Association of Canine Professionals #1006 P
Endorsed by National. Assn. Dog Obedience Instructors -#970

CareDogTraining.com

Office use: Conf: Pc Em Ph _____ Pvt. OR _____ G I TR _____ ProRtd. _____ CS CK # _____ Sep-08