

Class: \_\_\_\_\_ Dates: \_\_\_\_\_ Paid: cash card check # \_\_\_\_\_

**Mutts, Manners and More, LLC**  
Dog Training: From Pets to Performance

**HANDLER INFORMATION**

Name:

Address:

City:

Phone:

Email:

Best way to contact text phone call email

**DOG INFORMATION**

Name:

Age:

Breed:

male

female

Rescued: yes no

Spayed/neutered: yes no

How long has your dog lived with you?

Veterinarian:

City:

Date of last vaccinations:

Rabies Tag # \_\_\_\_\_

Current on flea/tick: yes no

Please list any goals you have for your dog and/or issue(s) that your dog is currently having:

My signature below indicates that I have been given access to a copy and am familiar with the Training Facility Operating Policies.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_