

**TAKE THE LEAD DOG TRAINING**  
2755 Blacks School House Road, Taneytown, MD 21787  
Trainer 443-255-7814 / Office 443-257-0367

**PUPPY CLINIC RESERVATION FORM**

**Spring Clinics: Two Clinics, Saturday April 10, 2010**

**Session One: 10:30 to 1:00    Session Two: 2:00 to 4:30**

**The clinic:** Each clinic will be limited to only 30 registrants to provide quality time in a small class setting so that you can get the one-on-one attention you deserve. Topics covered will include: Field Time, Socialization Do's and Don't's, Nutrition, Play Behaviors, Reading Your Dog, Training and Training Equipment, Grooming, Crate Training, and Easier House Breaking. We will also address individual behavioral issues in the group. Each registrant may bring one additional family member also. You may bring your puppy, one per family, but please bring a safe and appropriate crate for your puppy to rest in. Your puppy should have had its initial series of puppy booster shots before coming out. By sending in this registration form you are acknowledging that your puppy will have had its required series of immunizations before coming out onto the field.

**What to bring:** We work in a park-like outdoor setting at the above address in Taneytown. Please wear comfortable sneakers or boots and long pants, and depending on the weather, dress in layers, because it can be breezy on the field. Along with your puppy, bring its crate so it can travel safely in the car and be confined comfortably while resting here. Also bring a regular non-extendable lightweight leash, and a flat or buckle-type collar. If you have a large-breed puppy that is getting fairly big, bring a training or prong collar if you have one, but it is not required. We will demonstrate some of the benefits, drawbacks, and uses of these different tools at the clinic.

**How to register:** *We will accept and confirm the first 30 registrations for each clinic session. Please fill out the registration form below, and return it along with a check for \$24 payable to Take the Lead Dog Training, to the above address. We will acknowledge your place in the clinic upon receipt.*

-----  
**Registration: Return this portion with your check to hold your reservation for one of the sessions. Forms received without payment will not hold your reservation. For questions call 443-257-0367.**  
*We will respect your email address and personal information and it will not be shared.*

Your Name \_\_\_\_\_ Your Phone \_\_\_\_\_

Your email address \_\_\_\_\_

Your Pup's Name \_\_\_\_\_ Sex \_\_\_\_\_ Breed \_\_\_\_\_

Your Pup's DOB \_\_\_\_\_ Any Issues to Address? \_\_\_\_\_

Clinic Choice: (Pick One)     I can be assigned to either clinic time available on April 10, 2010  
   I can only make the 10:30 am clinic time on April 10, 2010  
   I can only make the 2:00 pm clinic time on April 10, 2010

***Thank you for your registration. We will acknowledge receipt within 24 hours to confirm your date.***