



TRICK TRAINING REGISTRATION

Fee (s): \$102.50 +hst

Class (s) Entered – TRICK TRAINING

Dog Information

Name: _____

Breed (s): _____

Birth Date: ____/____/____

Male

Male Neutered

Female

Female Spayed

Proof of Vaccination/ titer attached: Yes No

Proof of vaccination must be attached to confirm spot in classes. Dogs must be up to date on Rabies, DAP and Bordatella vaccinations to attend any classes. Please ensure your dogs vaccinations are up to date or will be prior to start of classes.

Handler Information

Name (Primary Handler): _____

Name (Secondary Handler if applicable): _____

Complete Address: _____

Phone Number (s): _____

Email (Required): _____

Weekdays available for class: Tuesday Wednesday

Please circle if you intend to have your dog evaluated for the Novice Trick Title at completion of the course: Yes No

Email form to thedoggymtimmins@gmail.com for next steps

OFFICE USE ONLY

Vaccines UTD/Date Due: _____

Class Day/Time: _____

Invoiced: _____

Paid: _____