

# OBEDIENCE LABORATORY

## REGISTRATION FORM

***PLEASE EXPLAIN IF YOUR DOG HAS DONE ANY OF THE FOLLOWING:***

**GROWLED:** \_\_\_\_\_

**SNAPPED:** \_\_\_\_\_

**NIPPED:** \_\_\_\_\_

**BROKEN SKIN:** \_\_\_\_\_

***PLEASE CHECK THE FOLLOWING THAT APPLIES TO YOUR DOG:***

**DIFFICULT TO CONTROL ON LEASH:** \_\_\_\_\_

**WON'T COME WHEN CALLED:** \_\_\_\_\_

**RUNS AWAY IF LOOSE:** \_\_\_\_\_

**PLAYS TOO ROUGH:** \_\_\_\_\_

**RESENTFUL OF DISCIPLINE:** \_\_\_\_\_

**NEVER SETTLES DOWN:** \_\_\_\_\_

**JUMPS ON PEOPLE:** \_\_\_\_\_

**NOISY (BARKING/WHINING):** \_\_\_\_\_

**DIFFICULT TO MOTIVATE:** \_\_\_\_\_

**HYPERACTIVE:** \_\_\_\_\_

**TIMID:** \_\_\_\_\_

**INITIALLY WARY OF STRANGERS:** \_\_\_\_\_

**FRIENDLY OUTGOING:** \_\_\_\_\_

***WHAT WOULD YOU LIKE TO GAIN MOST FROM THIS COURSE?***

\_\_\_\_\_  
\_\_\_\_\_

**HOW DID YOU HEAR ABOUT OBEDIENCE LABORATORY?**

____ vet office	friend _____
____ previous class	other _____