

**Enrollment Packet
For**



LynnDee's K9 Socialization Training

N. 2704 Colville Road

Spokane, WA 99224

(509)838-0596

Dear Dog Owner,

Thank you for your recent inquiry about socialization training sessions. LynnDee's K9 Socialization Training is committed to providing a safe, fun and stimulating social environment for your K9 during a weekday during our business hours. Your K9 will enjoy supervised playtime with other K9s to improve appropriate play, learn to respect other dogs boundaries, learn good manners when people approach and while entering/exiting the building. Some leash work may be done as needed.

Enclosed, you will find information and forms you need to register your K9 for our services. Simply fill out the enclosed forms and return them to LynnDee's Grooming & Training Center, N. 2704 Colville Road, Spokane, WA 99224 along with the Veterinarian Health Certificate with proof of vaccinations. Once we receive your enrollment form and Health Certificate, we will screen your paperwork and call to schedule a time when we can meet your K9 for an introductory assessment.

If you have any questions, please feel free to contact us at (509) 838-0596. We look forward to seeing you and your K9.

Debbie Wing

Debbie Wing
Owner

LynnDee's K9 Socialization Training

General Information & Policies

The purpose of LynnDee's K9 Socialization Training is to provide a safe, fun and stimulating environment for dogs during weekly business hours. To ensure the safety and health of your K9 and our other guests, we require all K9s to comply with the following rules and regulations:

- Gender:** All dogs over 7 months must be spayed or neutered. For clients that have show dogs and want their dogs in socialization training we can provide sessions with special scheduling.
- Vaccinations:** All dogs must be up-to-date on their vaccinations. Owners must submit written proof of their annual vaccinations, rabies and the Bordetella vaccine. Rabies is required for puppies over 4 months of age.
- Health:** All dogs must be in good health. Owners will certify their dog(s) are in good health and have not been ill with a communicable condition in the last 30 days. Dogs that have been ill with a communicable condition in the last 30 days will require veterinarian certification of health to be admitted or readmitted.
- Behavior:** All dogs must be non-aggressive towards dogs and people, and not toy protective. Owners will certify their dogs have not harmed or shown aggressive or threatening behavior towards any person or any other dogs. Please remember: your dog will be spending most of the day with other dogs and the safety and health of all dogs is our main concern. If your dog is ever bites someone that requires medical attention, Washington State requires all doctors to report this to the health dept, and all dogs involved will be quarantined for a 10 day period. This will then terminate the ability to attend the socialization training and a referral for behavior modification will be recommended.
- Application:** All dogs must have a complete, up-to-date and approved application on file.
- Fees:** Fees are based on a socialization training pass plan.

Trial/Assessment	\$15.00 for half day trial period
Half Day Pass	\$13.00 for up to 4 hours during am or pm dufo dmorniafternoon session
One Day Pass	\$18.00
5 Day Pass	\$80.00 (\$16.00 per day)
10 Day Pass	\$150.00 (\$15.00 per day)
Additional Dog	½ price of the first dog's pass

Days & Hours: Monday-Friday from 7:30 am to 5:30 pm. (times as early as 6:30 am are available upon request). All dogs must be picked up by 5:30 pm or there will be a \$1.00 per minute charge per dog left after 5:30 pm. If your dog is not picked up by 5:45 we will board overnight for an additional \$25.

Reservations: It is required that your K9's socialization training day is scheduled ahead of time as we limit to no more then 5 in for training at time. Cancellations with less then 24 hours notice will be charged full fees.

Owner's Last Name: _____

LynnDee's K9 Socialization Training
K9 Personality Profile

General Information:

Owner's Name: _____

Address: _____

Home #: _____ Work #: _____ Cell #: _____

Emergency Contact Name: _____ Phone #: _____

Veterinarian Clinic: _____ Phone #: _____

Address: _____

K9's Name: _____ Date you acquired the dog: _____

K9's Breed: _____ Sex: M/F Age: _____

Where did you get your dog? _____

If adopted, do you have any knowledge of your dog's history? _____

Does your dog like children? Yes/No How does your dog behave around children?

Are there other animals in your household? If so, please list type, sex, and age of each: _____

How does your dog get along with other resident animals? _____

Health/Grooming

Does your dog have a flea or tick problem? Yes/No Allergies? Yes/No

Does your dog have hip dysplasia? Yes/No If yes, what restrictions need to be placed on your dog's activities or movements? _____

Does your dog like to be brushed? Yes/No Nail Trimming? Yes/No

Does your dog have any sensitive areas on his/her body? _____

Where is your dog's favorite petting spots? _____

Behavior

Is your dog afraid of any specific items or noises? Yes/No If so, please explain:

How does your dog react to strangers coming into your home or yard? _____

Are there any kinds of people your dog automatically fears or dislikes? Yes/No
If so, please explain:

Are there any kinds of dogs your dog automatically fears or dislikes? Yes/No
If so, please explain:

How does your dog react to puppies? _____ Children?

Has your dog ever growled at someone? Yes/No What were the circumstances:

Has your dog ever bitten someone? Yes/No What were the circumstances:

Does your dog have any problems in any of the following areas: (if so, please explain)

Mouthiness: _____ Barking: _____

Jumping; _____ Housetraining: _____

Digging: _____ Fence Climbing: _____

Other: _____

Has your dog ever growled or snapped at anyone who has taken his/her food or toys away from him/her? Yes/No If so, please explain: _____

Has your dog ever shared his food or toys with other animals? Yes/No

Does your dog play with any toys? Yes/No What?

Has your dog had any formal obedience training? Yes/No If yes, what, when and where? _____

What commands does your dog know? _____

Other comments about your dog that you feel would be helpful: _____

LynnDee's K9 Socialization Training Waiver

I, _____, hereby certify that my dog(s):
_____ is(are) in good health and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) have not harmed or shown aggressive or threatening behavior towards any person or any other dog. I have read and understand the following:

I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/ are attending LynnDee's K9 Socialization Training.

I further understand and agree that in admitting my dog(s) to the K9 Club, the staff have relied on my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or any other dog.

I further understand and agree that LynnDee's Grooming & Training Center, LynnDee's K9 Socialization Training staff, volunteers and family, will not be liable for any problems which develop, provided reasonable care and precautions are followed, and I hereby release them of any liability of any kind whatsoever arising from my dog(s) attendance and participation at LynnDee's K9 Socialization Training.

I further understand and agree that any problems which develop with my dog(s) will be treated as deemed best by staff and volunteers of LynnDee's, at their sole discretion, and that I assume full financial responsibility for any and all expenses involved.

I certify that I have read and understand the policies of LynnDee's K9 Socialization Training as set forth on the preceding pages and that I have read and understand the conditions, and statements of this agreement, including the following:

Fees: Fees are based upon a pass plan.

Days and Hours: Monday-Friday from 7:30 am to 5:30 pm. (times as early as 6:30 am are available upon request) LynnDee's is not a dog daycare or overnight boarding facility. LynnDee's will close for lunch from 12:15-1:15. All dogs must be picked up by 5:30pm or there will be a \$1.00 per minute charge per dog left after 5:30pm.

Reservations: Required. Cancellations with less than 24 hours notice or no shows will be charged full fees.

Dated: __/__/__

Signature of Owner: _____



LynnDee's K9 Socialization Training Health Certificate

For the health of all K9s that attend K9 Socialization Training at LynnDee's, we require that they be in good health and are protected from disease. Please have this form completed by your veterinarian and return prior to your K9's first day of training.

We do require that all dogs be current on their vaccinations as appropriate for their age including:

Parvo, Distemper Expires: __/__/__

Rabies Expires: __/__/__

Bordetella Expires: __/__/__

Titer Test results will be accepted. Dogs must be free of internal and external parasites.

Dog's Name: _____ Breed: _____

Owner's Name: _____ Phone: ____-____

Veterinarian's Name: _____

Name of Clinic: _____ Phone: ____-____

Address: _____

In order for your K9 to be admitted to LynnDee's K9 Socialization Training, please have your veterinarian sign the following:

I certify that the dog named above is in good health, has had a negative result of any internal or external parasites within a week of my dated signature and as appropriate for the age of the dog, has received all necessary vaccinations including, Parvo, Distemper, Rabies, and Bordetella. Titer Test results accepted. Please attach proof of vaccinations.

Veterinarian's Signature: _____ Date: __/__/__

Please Note: Your veterinarian's clinic print out is acceptable for vaccination record and fecal clearance.

LynnDee's K9 Socialization Training

N. 2704 Colville Rd. Spokane, WA 99224 (509) 838-0596