



**Intermediate Obedience
Registration Form
Start date: Wednesday, January 15, 2025
6:15 pm**

Handler's name: _____ Date: _____

Street address: _____ City: _____ Zip code: _____

Home phone: _____ Cell: _____ Email: _____

Dog's name: _____ Dog's age: _____ Breed: _____ M/F: _____

Spayed or Neutered: YES NO Age of dog when acquired: _____

Dog's origin: (circle one) Shelter/Rescue Professional Breeder
Amateur Breeder Pet Store Farm

History of Aggression ➡ Growling/snarling: YES NO
➡ Bite: YES NO
➡ If ➡ Yes Toward human: _____ toward another dog: _____

Please explain in detail:

Describe your dog's demeanor when with other dogs: _____

*** INCENTIVE FOR SEEKING TRAINING AT THIS TIME**

Previous training: Yes No If yes, location: _____

I heard about Keystone Dog Training through:

Shelter Veterinarian Word of mouth Internet
Registering will reserve a place in class for you and your dog.

Class size is limited and they fill quickly. Enrollment fee is non-refundable.
Please make sure of your commitment before you make your payment.

Please mail the following by January 8, 2025:

- Registration form
- Liability form
- Payment in full of 215.00 (check or money order)

To mailing address:

**Keystone Dog Training
P.O. Box 49
Lewisberry, PA 17339**

*Please contact Mary Smallwood about your plan to enroll in the
Intermediate class.*

*Email: keystonedogtrain@gmail.com
Phone: (717) 542-3427*

We look forward to working with you!