

# Animal Behavior Specialists, Inc.

## Registration Information

Registration should be completed through the mail. Forms will be processed the day they are received to reserve your position in the class. **Please send payment and one town form to: Office of Adult Educational Services, Genesee Valley BOCES, 8250 State Street Road Rd, Batavia, NY 14020. All checks should be made payable to "Genesee Valley BOCES." Please complete and bring this form with you the first week of class.** We look forward to working with you and your dog in the near future. If you have any questions the meantime, please call Karlene at (585) 889-0501.

## Participants Ages

While all family members are welcome, please remember that we need to create an appropriate learning environment for dogs and their owners. Children between 8 & 15 are required to attend with a supervising adult, and those under the age of 8 should be accompanied by a second adult.

## Class Location

Genesee Valley Boces, 8250 State Street Road. The building is located on State Street Road across the street from the Batavia High School.

**Puppy Kindergarten ( 4 Weeks)      K9 Age:** 8-16 weeks      **Start Date:**      **Time:**      **Fee:** \$50

Eliminate problem behaviors before they begin. Learn to understand your dog's personality, and how to respond with an appropriate level of correction and/or praise in an interactive and safe setting. This class focuses on the proper socialization between puppies and their human counterparts. These skills will also be incorporated with ways to handle house training, nipping, jumping, chewing, etc.

**First Class: Proof of vaccinations including: Distemper series and Kennel Cough.**

**Basic Obedience (7 Weeks)      K9 Age:** 4 months and older      **Start Date:**      **Time:**      **Fee:** \$85

Develop a mutual respect between you and your dog. Learn to use this relationship to master basic obedience commands, such as sit, stay, down, come, heel and stand. We use soft, effective training methods, which enable the dog to trust and respect their family. We emphasize verbal praise over a food reward to ensure that your dog is willing to work any time, any where. This class also includes a discussion which covers behaviors such as; dominance, nipping, chewing, jumping, digging, etc..

**First Class: NO DOGS. Proof of vaccinations including: Distemper Series, Kennel Cough, and Rabies.**

**Intermediate Obedience (6 Weeks)      K9 Age:** 4 months and older      **Start Date:**      **Time:**      **Fee:** \$75

This class will begin to develop your dog into the dog you can take anywhere. Longer down and stay commands for those picnics in the park, heeling off leash, social greetings that teach your dog proper introductions to new human and canine friends all give you and your dog more freedom without loss of control.

**First Class: Proof of vaccinations including: Distemper Series, Kennel Cough, and Rabies**

**Canine Good Citizen (8 Weeks)      K9 Age:** 4 months and older      **Start Date:**      **Time:**      **Fee:** \$90

This certification program tests canine behavior dogs in simulated everyday situations. Your dog will learn how to greet strangers politely, without jumping or barking, allow a new acquaintance to handle and groom them without distress, and to greet other canines socially and safely. We identify and reward dogs that have the training and demeanor to be community members in good standing, as well as a reliable family member. All dogs passing the CGC test receive a certificate from AKC, and are recorded in the Canine Good Citizen Archive. CGC is a valuable certification recognized by many agencies such as, dog parks, insurance companies, and rental housing. We recommend that your dog has mastered the skills covered in Basic Obedience Class before enrolling in this one.

**First Class: Proof of vaccinations including: Distemper Series, Kennel Cough, and Rabies**

## Registration Form

The information on this form is used in the diploma at graduation. Please print clearly and include all names to appear on the certificate.

Participants Names \_\_\_\_\_ Dog's Name \_\_\_\_\_

Street \_\_\_\_\_ Breed \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Referred By \_\_\_\_\_ Is your pet Spayed or Neutered? \_\_\_\_\_

E-mail Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_

Program \_\_\_\_\_ Location \_\_\_\_\_ Start Date \_\_\_\_\_ Time \_\_\_\_\_

*Note: Class refunds are only applied for medical reasons. If you encounter scheduling difficulties, credit is transferable to another class.*

I agree that my participation in classes provided by Animal Behavior Specialists, Inc is at my own risk.

I assume all risk and hazards incidental to the conduct of the program of which I am enrolled. Furthermore, I hereby release and hold harmless Animal Behavior Specialists Inc.

In accepting this application to participate in Animal Behavior Specialists, Inc classes, I hereby waive and release any claims due to any and all injuries that might be sustained by myself, my child/children, or my dog in participation in this program.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please Complete and bring this form to the first class.**