TEMPERAMENT EVALUATION QUESTIONNAIRE

PLEASE COMPLETE ONLY IF YOU ARE REGISTERING FOR THE BASIC EDUCATION COURSE.

CIRCLE "YES" OR "NO" IN ANSWER TO EACH QUESTION:
(Note -"You" includes ALL FAMILY MEMBERS)

I.	If you go near or touch your dog's food or dish when he is eating, win he show his teeth, growl. or snap?	Yes	No
2.	If your dog has a bone, toy, or a piece of food in his mouth and you try to take it from him will he show his teeth, growl, or snap?	Yes	No
3.	When you discipline or punish your dog, does he ever show his teeth, growl or snap?	Yes	No
4.	Does your dog guard (growl. show teeth, snap) stolen items? (socks, food, etc.)	Yes	No
5.	If your dog is on your bed or in a favorite resting spot and you try to make him move or get off, will he show his teeth. growl. or snap?	Yes	No
6.	Does your dog, otherwise house trained, urinate on your bed, furniture or other objects? If so, how many times?_____	Yes	No
7.	If your dog is lying on the floor and you roll him onto his back to clip his nails or to examine him for ticks. will he show his teeth growl, or snap?	Yes	No
8.	How often does your dog see or meet other dogs?_____ What is their typical reaction? (viciously lunges, playfully leaps, hides behind you, growls. barks, etc.)_____	Yes	No
9.	Have you ever been concerned with your dog's interaction with other (non-family owned) dogs? Please explain: _____	Yes	No
10.	Has your dog ever shown his teeth growled. or snapped at a relative, friend or stranger? If so, please explain:_____	Yes	No
11.	When your dog meets a new person, is he fearful or very shy?	Yes	No
12.	When you arrive home does your dog roll onto their back and urinate when they greet you?	Yes	No
13.	When you discipline your dog do they crawl on their belly or roll onto their back and urinate?	Yes	No
14.	When you take your dog to an unfamiliar place, are they fearful, perhaps hiding, cowering, shaking, or trying to leave?	Yes	No

IF YOUR DOG HAS EVER BITTEN ANYONE (FAMILY, FRIEND, OR STRANGER)
SERIOUSLY ENOUGH TO BREAK SKIN, OR IF YOUR DOG HAS EVER BEEN INVOLVED
IN A DOG FIGHT, PLEASE EXPLAIN WHAT HAPPENED ON A SEPARATE SHEET
OF PAPER.

HUMANE TRAIN with SAM JONES CLASS REGISTRATION FORM

1.   **REGISTRATION WITH PAYMENT MUST BE RECEIVED 24 HOURS PRIOR TO THE FIRST SESSION.**

2.   Choose which course is appropriate for you and your dog. BE SURE YOUR DOG IS ELIGIBLE FOR THE COURSE (requirements are listed on my HUMANETRAIN.com website & Facebook page).

3.   Classes are filled on a first come, first served basis. To ensure enrollment in the class of your choice, Please send this form with your payment!

4.   If you are registering for BASIC, also fill out the Temperament Evaluation Questionnaire on the reverse side of this form.

5.   Return this form with a Check or Money Order payable to:

        Sam Jones
        60 S South Long Lake Rd, Traverse City, Michigan 49685

        FULL PAYMENT IS REQUIRED to process your registration. If you would like to pay with an online payment such as **ZELLE**, **VENMO**, or **PAYPAL,** please call me to make arrangements!

6.   Proof of your dog's current DISTEMPER/ PARVO, & RABIES (age appropriate) are required for registration into all classes. You may send a copy of proof of vaccines with your registration or bring it with you to the first day of class.

7.   Puppies must receive their 1st vaccine two weeks prior to the first class.

8.   Upon receipt of your registration, I will call you to confirm that you have a spot in the class of your choice!

PLEASE WRITE CLEARLY!!!

This registration is for the _____ course.

Day of the week_____Beginning Date_____Time_____

Your Name_____

Dog's Name_____Dog Breed_____

Age when class begins_____Sex_____

Home Phone_____Work Phone_____

Email_____

Can we have TEXT you?_____Which number?_____

Mailing Address_____

City_____State_____Zip_____

Has your dog had any previous formal training? Please Describe briefly_____

_____

Is your dog adopted? Yes / No (There is a $20 discount for adopted dogs with PROOF of adoption)

If you are registering for BASIC, also fill out the Temperament Evaluation Questionnaire on the reverse side of this form.

How did you hear about my training facility?

Please list 3 goals that you would like to reach in this class.

_____

_____