

BLUE DOG RANCH

(REQUEST FOR TRAINING)

OWNERS

NAME _____ **DATE** _____

DOGS NAME _____

WHY DID YOU COME TO US FOR HELP? _____

WHEN DID YOUR DOG'S PROBLEM START?

WHAT HAVE YOU DONE SO FAR IN RESPONSE TO YOUR DOG'S PROBLEM BEHAVIORS?

HAVE YOU ALREADY RECEIVED HELP FROM ANOTHER TRAINER? IF "YES" WHAT DID THEY ADVISE YOU TO DO?

HAS YOUR DOG EVER BIT ANOTHER ANIMAL OR HUMAN? _____

EVALUATION/TRAINING PROPOSAL BY TRAINER:

OWNER UNDERSTAND THAT THEY MUST FOLLOW OUR INSTRUCTIONS AND INTERACT WITH THEIR DOG CORRECTLY FOR THE LIFE TIME OF THE DOG IN ORDER TO HAVE GOOD AND PERMANENT RESULTS FROM THEIR TRAINING EXPERIENCE.

TRAINERS SIGNATURE: _____ **DATE:** _____

OWNERS SIGNATURE: _____ **DATE:** _____