

**Behavior Consult and Class Registration Form**  
**DOGS! Carolyn Barney CNWI**

Reason for consult \_\_\_\_\_

Owner Information

Full Name \_\_\_\_\_

E-mail \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please list other household members with ages: \_\_\_\_\_

\_\_\_\_\_

How did you hear about DOGS!, Carolyn Barney? \_\_\_\_\_

Dog Info

Dog's name \_\_\_\_\_ Breed / Mix \_\_\_\_\_ Age \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Spayed/Neutered Yes \_\_\_ No \_\_\_ At what age? \_\_\_\_\_

How long have you owned your dog? \_\_\_\_\_

Where did you get your dog? \_\_\_\_\_ Age obtained \_\_\_\_\_

Other pets? \_\_\_\_\_

Veterinarian Name \_\_\_\_\_

Clinic Name and number \_\_\_\_\_

Does your dog have any current or past medical issues? \_\_\_\_\_

Does your dog have any allergies (food, environmental)? \_\_\_\_\_

Current on vaccines? Yes \_\_\_ No \_\_\_ on Heartworm Preventative? Yes \_\_\_ No \_\_\_

What do you feed your dog? \_\_\_\_\_ How often \_\_\_\_\_

Where does your dog sleep? \_\_\_\_\_ During day? \_\_\_\_\_

What is your dog's daily routine? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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How would you best describe your dog? Check all that apply

Attention deficit disorder\_\_ Bonded to me\_\_ Confident\_\_ Fearful of new people\_\_  
Fearful of new dogs\_\_ Loves food\_\_ Loves to play\_\_ Loves toys\_\_ Perpetual motion\_\_ Picky eater  
\_\_ Reserved\_\_ Sensitive\_\_ Stays focused\_\_ Timid\_\_ Tires easily\_\_

How often does your dog play with other dogs? Everyday\_\_ About 3 times per week\_\_ About 1 time  
per week\_\_ Weekends only\_\_ Rarely\_\_ Never\_\_

What does your dog do when she/he meets a NEW DOG? Check all that apply

Acts Friendly\_\_ Barks\_\_ Cautiously approaches\_\_ Growls\_\_ Hides\_\_ Lunges\_\_ Reserved\_\_  
Seems stressed\_\_ Stares\_\_ Wants to play\_\_ Wiggles\_\_

What does your dog do when she/he meets a NEW PERSON? Check all that apply

Acts Friendly\_\_ Barks\_\_ Cautiously approaches\_\_ Growls\_\_ Hides\_\_ Lunges\_\_ Reserved\_\_  
Seems stressed\_\_ Stares\_\_ Wants to play\_\_ Wiggles\_\_

YOUNG CHILDREN? \_\_\_\_\_ OLDER and TEENS ? \_\_\_\_\_  
MEN? \_\_\_\_\_ WOMEN \_\_\_\_\_

Has your dog bitten or tried to bite another dog or person? Yes\_\_ No\_\_  
If yes, please explain in detail

Describe what behaviors you need help with \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have these been occurring? \_\_\_\_\_

Have you done any training with your dog for this or other issues or basic obedience?

Yes\_\_ No\_\_

Please list the type of training (class, private instructor training) and what methods and equipment  
were used: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anything else we should know about you or your dog: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please Read and sign on next page:  
Payment Policy, Cancellation /Refund policy, Liability waiver, Photo & Video Release.

Please Read each term, condition and policy of DOGS! as outlined below. By clicking submit or signing at the bottom of this page, you accept all terms, conditions and policies of DOGS! as outlined.

Payment Policy: We are committed to servicing all of our clients with personal attention. Therefore, we require payment at the time of **reservation** for all services unless otherwise noted. Payment Methods: Credit card via Paypal, cash and check.

Cancellation/Refund Policy: If you wish to cancel a consultation prior to the appointment date, we require 48 hours' notice for a full refund otherwise you will be charged for the entire training session fee. Class and Workshop enrollment may be cancelled and fully refunded 5 days prior to the date of the beginning session, 50% refunded after the 5 days prior up to 48 hrs. before. NO REFUNDS within 48 hr.

#### Liability Waiver and Policies

I understand that by agreeing to a payment explanation above, that I will pay prior to initial consult or other training services agreed upon as stated above. I understand that I am responsible for payment in full regardless of whether I choose to complete the training program.

DOGS!, Carolyn Barney and agents will endeavor to create as safe an environment as possible for the training of my dog and will offer only sound, safe, and responsible training and training instructions. However, I recognize that DOGS!, Carolyn Barney or agents are not responsible for any unintentional errors, omissions, or incorrect assertions. I understand that the recommendation of any other product or service is not a guarantee of my satisfaction with that product or service. Further, I am and will remain responsible for the actions of my dog at all times and I hereby agree to indemnify and hold harmless DOGS! Carolyn Barney and agents of any and all claims of injury, expense, costs, or damages caused by the actions of my dog while under DOGS! Carolyn Barney and Agents instruction or control and under my own care as a result of following training instructions. I have been told by DOGS! Carolyn Barney and agents and understand the inherent risks of owning a dog, including but not limited to the risk of dog bites to myself or others.

Photo and video release I consent to the use of photographs and videos of myself, family and dog(s) by DOGS! Carolyn Barney and agents, including but not limited to publishing the media on DOGS, Carolyn Barney website, email marketing, educational seminars.

I have read and agree to the above Payment Policy, Cancellation /refund policy, Liability waiver, Photo and Video Release.

Yes I agree, Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Email for PayPal bill: \_\_\_\_\_