**PUPPY PRE-SCHOOL REGISTRATION**

**Owner’s Name: ………………………………………. Phone: …………..……**

**Address: ………………………….………….. Wk: …………..……**

**………………………………………**

**Puppy’s Name: ……………………………… Sex: M F**

**Breed: …………..………………… Age/Date of Birth: ………………**

**Time: Wednesday 6pm - 7pm 7.15pm – 8.15pm** (numbers dependent)

(We will Phone to confirm starting date)

**Cost: $80.00 for 4 x 1 hour lessons**

(To be paid at the first class)

***NOTES:***

1. ***The currently recommended vaccination regime must be started prior to beginning Puppy Pre-School.***
2. ***Please bring: a lead, collar, some food (cheese, or luncheon sausage are ideal) and a favourite toy.***
3. ***Feel free to have other family members attend.***

**Signature: …………………….………….. Date: / /**

Confirmed: [ ] (For Office Use Only)