

# GREENE COUNTY PARKS AND RECREATION

## Dog Obedience Class

Our dog obedience classes are designed to develop and build a strong relationship between pet and owner. Flexible training methods are employed for home management, un-established boundaries as well as common and un-common cues. Instructed by Jessica Gahan—Certified Animal Behavior Dog Trainer.

(Visit her website at [www.PACKDogTraining.org](http://www.PACKDogTraining.org))



Please note:

- ◇ Provide a copy of shot record with proof of Rabies, Parvo/ Distemper, and Bordetella shots when registering for class.
- ◇ All dogs must be legally licensed, vaccinated and wearing a visible dog license.
- ◇ Dogs must be leashed when entering or leaving the class area.
- ◇ Check with the instructor at first class for proper leashes, collars and other equipment.
- ◇ Dogs that continuously display fear or aggression are not permitted in GCPR classes, this will be at the discretion of the instructor.
- ◇ An adult must accompany child handler if handler is under 16 of age.

**Puppy Preschool Class:** Socialization, boundaries and basic obedience cues. Owners learn solutions to housebreaking, chewing, jumping and other unwanted behaviors.

**Beginner Basics Class:** Adolescence, home management, discipline and problem solving through a variety of solutions using different methods of training. Also includes socialization and obedience cues.

**Intermediate Class:** Establish solid responses to basic cues with distance and distractions while learning "K-9 Good Citizen" (CGC) test components.

*Start Date January 9, 2010*

GCAB	Saturday	12:30-1:30p.m.	Puppy Kind. (8 weeks—6mos)	\$79
GCAB	Saturday	2:00—3:00p.m.	Beginner (6mos & Older)	\$79
GCAB	Saturday	3:30-4:30p.m.	Intermediate (6mos & Older)	\$79

*All classes are one hour in length and six weeks per session.*

GREENE COUNTY PARKS AND RECREATION  
P.O. Box 358 Stanardsville, VA 22973 434-985-5226  
DOG OBEDIENCE PARTICIPANT REGISTRATION FORM



Dog's Name \_\_\_\_\_ Breed \_\_\_\_\_ Dog's Birthdate \_\_\_\_\_

Owner's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Class Title \_\_\_\_\_ Class Meeting Day and Time \_\_\_\_\_

Fee     \$79    

The Greene County Department of Parks and Recreation does not provide medical coverage or insurance for individual participants. All medical insurance protection must be provided by the parents or participant. In the event of an emergency, I hereby give my consent for the program supervisor of the Parks and Recreation Department to arrange for medical treatment or Emergency Room treatment by a physician on staff. I also hereby give my consent and approval for my son/ daughter/myself to participate in this activity sponsored by the Greene County Department of Parks and Recreation. I will not hold Department Personnel, Instructors, School Personnel or Volunteers responsible in case of accident or injury as a result of my/my child's/my dog's participation in this program. I understand the risks involved with this activity and know that my child is/I am physically able to participate in this program.

\_\_\_\_\_  
Signature Parent/Guardian/Participant

\_\_\_\_\_  
Print Name—Parent/Guardian/Participant

\_\_\_\_\_  
Date