

# Tellington TTouch Workshop with Cynde Van Vleet Covina, CA, February 16 - 18, 2018 Registration Form

*Please return to: Cynde Van Vleet, 2922 Caballista Del Norte, San Clemente, CA 92673  
or email: [cynde@icpaws.com](mailto:cynde@icpaws.com)*

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_  
Province/State \_\_\_\_\_ Postal/Zip code \_\_\_\_\_ Country \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Email \_\_\_\_\_

## **Date/Workshop Cost**

February 16 – February 17: 2-day workshop: \$275; (Early Bird by January 15 - \$250)  
February 16 – February 18: 3-day workshop \$400; (Early Bird by January 15 - \$350)  
Please indicate the event you plan to attend.

**Cancellation Policy:** Cynde Van Vleet reserves the right to cancel a session due to circumstances beyond her control or if enrollment is deemed insufficient. In this case all tuition will be refunded.

**Participant Cancellation Policy:** For cancellations made more than 30 days in advance of the training, a refund will be given less a 25% handling fee. For cancellations within 30 days or less of the training, the 25% handling fee will be retained and the balance may be credited toward another workshop with Cynde within one year.

## **You may pay by:**

- Returning this form by email and paying by PayPal at <http://icpaws.com/events.html>
  - Returning this form with check or money order payable to: IC PawsAbilities
- Your registration will be confirmed when your payment has been received, and you will be sent directions and further information about the courses. We are looking forward to seeing you!*

*If you would like to bring a dog, please fill out the following questionnaire:*

## **Dog Profile**

Name: \_\_\_\_\_ Breed/Type: \_\_\_\_\_

Age: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: \_\_\_\_\_ Spayed/Neutered? \_\_\_\_\_

How long have had him/her? \_\_\_\_\_

What do you particularly like/love about your dog?

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How would you describe your dog's personality? (e.g. eager to please, enthusiastic, nervous, temperamental, friendly, quiet, aloof, shy, timid etc.)

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How does your animal usually respond people he/she doesn't know?

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How does your animal usually respond to dogs he/she doesn't know?

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How does your animal usually respond in unfamiliar situations or places?

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**Living Environment:**

Describe your animal's living environment (housing, companions etc.)

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**Behaviors:**

Does your dog have some behavior that you wish was different? (e.g. growling, barking, lunging, biting, chewing (on what?), digging, jumping up, pulling, licking, running away, inappropriate urination, separation anxiety, hyperactivity, reactivity to cats, vehicles/machinery etc.)

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What does he/she do, and when? (please be as clear as possible about circumstances under which your animal exhibits the behavior)

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What have you done, if anything, to change the behavior? Has it helped?

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Are you usually comfortable about handling your dog in all circumstances? (please clarify)

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**Fears/concerns:**

Does your dog have concerns? (e.g. loud noises, new environment, veterinarian, thunder storms, slippery surfaces, grooming, nail clipping, strangers, bicycles, skateboards, etc.)

How does your dog demonstrate his/her concern? (please be as specific as possible about the observed behaviors and reactions)

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What have you done, if anything, to change these concerns? Has it helped?

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How do you usually deal with your dog's concerns?

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**Health:**

Please describe your dog's health and any health concerns you may have: (e.g. aging, arthritis (where?), car sickness, dysplasia, stress, allergies (symptoms?), disease, injury or surgery (when and what?))

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Is your animal currently under the care of a veterinarian? What for? Is he/she on any medication?

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**Other comments:**

What are your goals for bringing your dog to this workshop?

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Other comments or items of note:

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**WAIVER:** I hereby waive and release owners and instructors, agents, representatives and assistants of **IC PawsAbilities, Whole Dog Training, Tellington TTouch® Training** and the owners of any and all animals I work with - from any liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but without limitation, any injury or damage resulting from the action of any dog including my own, and I expressly assume the risk of such damage or injury while attending the training session. Furthermore, my dog is current on his/her rabies vaccination.

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Signature

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Print Name

I, the above signed, give full permission to use any photographs or video of this event.

Agree  Disagree