

Puppy Obedience (3months up to 6months old)

6 Classes /1 hour each

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Week #1

- Puppy Management & Goals
- Engagement Skills & Confidence
- Touch Game
- Name recognition
- Eye contact (Watch game)
- "Cues" "Markers" "Praise" "Corrections"

Week #2

- Luring skills: Sit, Down & Stand
- Leash handling & Leash Pressure
- Luring
- Come when called (recall)
- Canine body language
- No biting, jumping

Week #3

- Game: Wait & Take "Place" introduced
- Game: Drop it
- Pass the Puppy / Socialization
- Puppy handling & potty training

Week #4

- "Let's Go" Loose leash walking
- · "Perch" introduced
- Place: Sit & Down
- Stay
- Go to bed or kennel

Week #5

- Loose leash walking turns
- · Game: Leave It
- Place: stay on the place.
- Perch: Go to.
- Refocusing & Distractions

Week #6

- Come Front Catch
- AKC Puppy Star test offered
- Graduation Photos
- Q & A work on areas the class needs help with.

For your first class please arrive a little early if possible. I'll need to see that you have the following items with you:

First Class Only Please Bring:

- Proof of Veterinary Care (AKA Record of Vaccinations)
- Payment for Course in full or the remainder due after your deposit.
- Signed Waiver for the Course. (attached to this document)
- Veterans with a Veteran ID or DD214 please ask about our Veteran Discount!

Bring to Every Class:

- 4'-6' leash attached to your dogs flat collar or martingale you may be using. (no retractable, no bungee.)
- Tags or ID on your dog.
- Treat Rewards or Toys for your pup (please no squeaking toys)
- Poo bags / Clean up kit
- Treat pouch strongly encouraged.



Student Info & Waiver

Name:				
Address:		····		
hone: Cell Phone:				Texting: Y / N
E-Mail:				
Dog's Name:		_ Dog's Age:	_ Sex:_	
Dog's Breed:		_ Spayed/Neutered: Y / N	1	
According to the risk to my participating in this activity before, of sufficiently prepared for participation qualified medical professional. I cermy or my dogs participation in this a	during and after class. I n in this activity, and ha tify that there are no he	one who may accompany certify that I and my dog ve not been advised to no	are physot partici	sically fit, have pate by a
I WAIVE, RELEASE, AND DISCHA arising from the negligence or fault injury, property damage, property th my traveling to and from this activit ENTITIES OR PERSONS: All 4 Par volunteers, representatives, and ag	of the entities or person neft, or actions of any ki y, or for any public acce ws Training LLC and/or	ns released, for my death and which may hereafter on the ses, or group outings THE their directors, officers, e	i, disabili occur to E FOLLC employee	ty, personal me including WING es,
I acknowledge that All 4 Paws Train agents are NOT responsible for the conducting a specific activity on the	errors, omissions, acts			
I hereby consent to receive medica accident, and/or illness during this a		pe deemed advisable in the	ne event	of injury,
I understand that I am responsible a individual person, or other dog, whi access, or other group outings. I an property not belonging to myself where the contract of the cont	le participating in this ac n also responsible for a	ctivity, or during any activ ny damage I myself or my	ities that y dog ca	involve public
I understand while participating in the film likeness to be used for any legit and assigns.				
The Accident Waiver and Release of waiver to the maximum extent permit has been rescinded in writing and	nissible under applicable	e law. This waver will rem		
I CERTIFY THAT I HAVE READ TH AWARE THAT THIS IS A RELEASE WILL.				
Participant's Signature		D	ate	