



Dog's Place

"Where it's all about you & your dog"



THE NOSE KNOWS!

with Dee Ganley CPDT, CACB

SATURDAY, JUNE 5, 2010 • 9 am - 12 pm

Handler/Dog Team

Introduction to

Scent Nose Work - For Inside Play/Work

Dogs have an amazing sense of smell and a natural desire to hunt. This class will focus on teaching you how to encourage and develop your dog's natural scenting abilities by using their desire to hunt and their love of toys, food and exercise.

Plus, this class will also advance the dog's scent discrimination skills taught in the basic nose work class- we will be matching an odor to a simple behavior that the dog already knows; like sit or down.

It's a great workshop for your dog and you to have fun, build confidence working as a team and burn lots of mental and physical energy and to find out just how you can help develop your dog's nose.

Scent games are useful because:

- All dogs have the natural ability
- The act of scenting both stimulating and tiring for your dog
- Scenting games can be played by the whole family inside or outside

Early Bird SPECIAL - \$75 if registered by May 15th (\$85 after May 15th)

For Registration call Sue Frisch at (570)729-8977

CEU's Pending Through CPDT and IAABC

Dog Training Classes & Behavioral Consults

Your Dog's Place, LLC - (570)729-8977 • yourdogsplace@yahoo.com

Nose Knows Workshop Registration

Your Dog's Place, LLC

Honesdale, PA Ph: (570) 729-8977 or (570)493-2353 Email: yourdogsplace@yahoo.com

Cost of Class: \$75 Early Bird Registration **Date:** Saturday June 5th, 2010
\$85 after May 15th.

Location: Your Dog's Place **Time:** Registration 8:30 AM Workshop 9 AM - Noon

Payment: Cash or Check payable to Your Dog's Place, LLC, Payment must accompany registration.

Your Name _____ Dog's Name _____

Address _____ Zip _____

Day Phone _____ Evening Phone _____ Cell _____

E-Mail _____

Dog's Breed or Type _____ Age _____ Sex _____ Weight _____

Veterinarian Name and Phone _____

Please bring a copy of your dogs current vaccinations (Rabies & Distemper) or vet letter indicating titre levels.

Does your DOG have physical limitations or medical problems? Y / N What _____

Is the dog on medication at this time? Y / N What _____

Do YOU have any physical limitations we should allow for in class? Y / N Explain _____

Anything else you wish to tell us about your dog? _____

General Agreement: In consideration of the acceptance of this registration, and the holding of classes, and the opportunity to have the dog participate, I agree to hold Your Dog's Place, LLC, Susan Frisch and any guest trainers and assistants, the premises upon which the classes are to be held and their employees and their assistants, harmless from any claim for the loss or injury which may be alleged to have been caused directly, or indirectly to any person or thing by any act of dog or person while in or upon the premises or grounds or near any entrance thereto. I personally assume all responsibility and liability fro any such claim. I further agree to hold the aforementioned parties harmless from any claim of loss of this dog by disappearance, theft, death or injury to be caused or alleged to be caused by the negligence of the parties aforementioned, or by the negligence of any other person or any other cause or causes. I hereby assume the sole responsibility for and agree to indemnify and save the aforementioned parties harmless from any and all loss expenses, including legal feed, by reason of the liability imposed by law upon any of the aforementioned parties for damage and expenses.

Photo/E-Mail Release: Signature on this form allows Your Dog's Place to use class videos and photos for educational and public relations purposes.

Class Fees are Non-Refundable and Non Transferable.

Signature _____ Date _____