

CANINE SPORTS CENTER
DIAMOND CREEK, LLC - 416 OLD MIDDLE STREET (RTE. 63)
GOSHEN, CT 06756
PHONE (860) 491-3904 EMAIL: DIAMONDS56@OPTONLINE.NET
WWW.CANINESPORTSCENTER.COM

K9 NOSE WORK® COURSE REGISTRATION (for all courses):

This 6-week course will use your dog's natural scenting ability. If your dog has a nose, they can participate. There are no obedience pre-requisites, but your dog does have to be able to be crated (please bring your own crate) or stay quietly in your car while other dogs take their turns. This course will teach your dog to use their natural ability to hunt and scent. Nose work will give your dog an opportunity to burn mental and physical energy while building confidence, and strengthening your relationship with your dog.

This class is limited to an enrollment of 6-8 students, so it is essential that you **return the form below with your payment** (make checks payable to Canine Sports Center) for **\$160**, tax included, as soon as possible. Visa, MC & Discover accepted. Payment must accompany registration in order for the registration to be considered valid. Faxed registrations are NOT considered valid without pre-arranged payment. If a course is full, you will be notified immediately. Otherwise, you will receive a confirmation e-mail or phone call no later than 3 days prior to the start of the course. You may also call to confirm enrollment if you wish.

NOTE: Fees are non-refundable after the first meeting of the course.

****Bitches that go into season are allowed as long as they wear seasonals while attending class.****

VACCINATIONS: All new students or students who have not had vaccination history verified by CSC in the last 6 months, please bring your dog's vaccination history to the first night of class, including proof of rabies (please provide a copy of the rabies certificate), DHPP (lepto optional) and vaccination is highly recommended for canine cough (Bordatella). Passing titers are acceptable for the DHPP requirement. Nosodes are allowed for dogs over 1 year of age when accompanied by a health certificate from a licensed veterinarian dated no longer than 15-days prior course start date. If this is the first nosework class you are attending, you must bring your dogs vaccination history.

🐾 Please DO bring your dog to the first night of class as all class weeks are active training.

For further preparation, dogs will need a non-correcting collar (buckle or quick-snap) and a light 6-foot leash (Gentle Leaders and Easy Walk harnesses will not be allowed as they impede the dog's forward motion). We do not allow prong collars or nylon/chain chokes in Pet Obedience Courses. Bring plenty of soft, high value, **SMELLY** treats in tiny pieces (salmon, tuna, liver, hot dog) in a treat bag. If you have any other questions please call. *Course fee subject to change without notice.

🐾 Directions:

🐾 From the North: Rte. 8 South to Exit 44 in Torrington. Take Rte. 4 West to the Rotary in Goshen. Go left at the rotary, onto Rte. 63 South. Continue 2.0 miles and the Center is on the right - #416.

🐾 From the South: Rte. 8 North to Exit 42 to Rte. 118 West to Litchfield. Turn right in the center of Litchfield onto Rte. 63 North. Continue North 4.3 miles and the Center is on the left - #416.

🐾 From Torrington: Take Rte. 4 West to the Rotary in Goshen. Go left at the rotary, onto Rte. 63 South. Continue 2.0 miles and the Center is on the right - #416.

----- DETACH HERE -----

Your Name: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Telephone: _____ E-mail: _____

Breed: _____ Age/DOB: _____ Dog's Name: _____

By signing below, I, the above applicant agree that I will not hold the Canine Sports Center, its instructors, Diamond Creek, LLC nor anyone affiliated with the Canine Sports Center or Diamond Creek, LLC responsible for any injury to me, my dog or family and friends I bring with me. Signing below also indicates that I am responsible for any damage my dog causes to another person or dog while on the grounds of CSC.

Participant's Signature: _____ Date: _____

Guardian's Signature (if participant is under 18 yrs) _____

I am signing up for the next # 1: Intro to Nose work and Intro to Odor Combo *vaccine verification

2: Intro to Odor and Intro to Nose work Combo (completion of Nose work # 1 required)

3: Continuing Odor: Birch (completion of Nose work # 2 required)

4: Continuing Odor: Birch and Anise (completion of Nose work # 3 required)

5: Advanced Odor: Birch, Anise and Clover (completion of Nose work # 4 required)

Starting on Date: _____ Day: _____ Time: _____

Please make checks payable to "CSC." Any checks that do not clear are subject to an additional \$30 fee and payment in cash or money order would be required for participation.
Effective 08/01/2017 TLP/LW/SG