

# La Crosse County Dog Project Training Classes 2020

Registration and copies of vaccinations due Wednesday, April 1st 4:30 p.m. to the 4-H Office.

## PARTICIPANT INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of Years in the Dog Project (please put "1" if this is your first year) \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Gender (please check one):

- Male  
 Female  
 Prefer Not to Answer

Ethnicity (please check one):

- Non-Hispanic/Latino  
 Hispanic/Latino  
 Prefer Not to Answer

Race (please check one):

- White  
 Black/African American  
 American Indian/Alaskan Native  
 Hawaiian/Pacific Islander  
 Asian  
 Prefer Not to Answer



## DOG INFORMATION

Call Name \_\_\_\_\_ Age \_\_\_\_\_ Breed \_\_\_\_\_

Has this dog had training classes before (Dog Project or otherwise)?  Yes  No

If Yes, how many years of training? \_\_\_\_\_

Has this dog been shown at Fair before?  Yes  No

If Yes, what class(es) (i.e. Pre-Novice, Novice, Grad, etc.)? \_\_\_\_\_

Does this dog have any competition titles?  Yes  No

If Yes, what ones? \_\_\_\_\_

Does this dog have any problem behaviors?  Yes  No

If Yes, what behavior(s)? \_\_\_\_\_

Rabies Tag Number \_\_\_\_\_ Date of Last Rabies Vaccine \_\_\_\_\_ \*(Copy Required)\*

Date of last DHLPP (distemper) Vaccine \_\_\_\_\_ \*(Copy Required)\*

Date of last Bordetella (kennel cough) Vaccine (write NA if your dog does not receive) \_\_\_\_\_

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## CLASS SELECTION

<p>AGILITY (Tuesdays)</p>	<input type="checkbox"/> Beginner (on leash) <input type="checkbox"/> Advanced (off leash) *	<input type="checkbox"/> \$15 4-H youth <input type="checkbox"/> \$50 community youth
<p>OBEDIENCE (Thursdays)</p>	<input type="checkbox"/> Beginner A—1st yr <input type="checkbox"/> Beginner B—2+ yrs <input type="checkbox"/> Novice (off leash) <input type="checkbox"/> Advanced *	<input type="checkbox"/> \$15 4-H youth <input type="checkbox"/> \$50 community youth
<p>SHOWMANSHIP (Thursdays)</p>	<input type="checkbox"/> Beginner A—1st yr <input type="checkbox"/> Beginner B—2+ yrs <input type="checkbox"/> Novice—3+ yrs*	<input type="checkbox"/> \$15 4-H youth <input type="checkbox"/> \$50 community youth
<p>QUIZ BOWL (Thursdays)</p>	<input type="checkbox"/> Beginner A—1st yr <input type="checkbox"/> Beginner B—2+ yrs <input type="checkbox"/> Novice—3+ yrs*	<input type="checkbox"/> \$0 4-H youth <input type="checkbox"/> \$50 community youth
<p>CRITTER HUNT (Mondays)</p>	<input type="checkbox"/> Beginner—1st yr <input type="checkbox"/> Advanced— 2+ yrs	<input type="checkbox"/> \$15 4-H youth <input type="checkbox"/> \$50 community youth

## PAYMENT

Checks payable to: La Crosse County Extension

Total Class Fees: \$ \_\_\_\_\_

- Meets the \$35 per student max registration fee
- Meets the \$60 per family max registration fee
- \$20 per youth late fee (*April 2nd-April 16th*)

FINAL TOTAL: \$ \_\_\_\_\_



UW-MADISON EXTENSION  
LA CROSSE COUNTY



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