



Do you and your dog have a failure to communicate?



The Berks County Dog Training Club can help

By enrolling in our eight-week course, you will learn how to teach your dog to sit, lie down, stand, stay, walk nicely on a leash and come when called. All classes are one hour long.

The orientation session without dogs will be at 7 p.m. The 8-week training course begins the week following orientation at your scheduled time. Directions will be mailed with your class confirmation.

In fall and winter, you may choose 6 p.m., 7 p.m. or 8 p.m. class. Classes are held at the 4-H Community Center in Bern Township on Tuesdays. Your dog **must be at least 6 months old** by the class start date for any session.

Spring and summer classes are available Mondays and Tuesdays at 7 p.m. and Saturday mornings (Spring is at 9 a.m. and Summer starts at 10 a.m.) and are held outdoors at the Sinking Spring Fire Company.

Orientation dates for 2012 are Jan. 24, April 24, July 10 and Sept. 25 and will be held Tuesdays at 7 p.m. Your normal class time/day will start the following week, except for Saturday spring and summer classes which begin that same week.

Your registration must be RECEIVED one week prior to the start date. Visit our website, www.berksdogtraining.org for more about our organization and to see pictures from our classes.

Our classes fill quickly, so don't be disappointed. Complete, cut and return the bottom portion of this form with your check for \$90 made payable to BCDTC as soon as possible.

Mail to: Harry Stiller, 213 Bard Ave., Sinking Spring, PA 19608. You are not enrolled until we receive your registration form and check!

Once your application is accepted, you will become a training member of the Berks County Dog Training club and information about club membership will be mailed to you with your confirmation letter.

Cancellation policy: If you cancel before orientation you will receive a refund, less a \$15 processing fee. If you cancel after orientation, NO refund will be given except for medical reasons (but you will have the option to attend a class later in the year).

Club phone voicemail: 610-670-7009.

NAME _____ (one person will be the member)

ADDRESS: _____

CITY, ZIP _____

E-MAIL _____ Newsletter preference, circle: e-mail or USPS

PHONE _____ (Home) _____ (work or cell)

DOG'S NAME _____ BREED _____ AGE _____ SEX _____

Preferred class, **circle one time:** FALL/WINTER indoors at 4-H: 6 p.m. 7 p.m. 8 p.m. on Tuesday No 8 p.m. class in January

Spring/Summer outdoors at SSFC: Monday 7 p.m. or Tuesday 7 p.m. or Saturday morning

Signature _____

Web

By signing above, I certify my dog(s) has/have a current rabies vaccination or titre