

RETURNING STUDENT REGISTRATION

For dog who has taken classes with us (not for new dogs!)

Name: _____

Email Address: _____

Last Class taken at AllBreed (Level and date) _____

Dog's Name/Breed/Age _____

Circle the class you are registering for:

Level 1 Level 2 Level 3 Therapy Prep Class Beginner Novice

Acting Workshop Intro to Animal Communication Beginner Rally

Advanced Rally Canine Good Citizen

Please put the start date of the class: _____

MAIL TO: AllBreed Obedience, 3241 Midland Avenue, White Bear Lake, MN 55110 within five working days of signing up with us.

Office Use Only: date received _____ Check # _____

Confirmation date (if applicable to class) _____