



Dogs over Threshold: Living with Fearful, Reactive Dogs



Learn how behavior modification, environmental control,
and calming tools can help your dog!

Saturday, October 5th 2019

at **WAG Agility**

2807 N US Highway 12, Spring Grove, IL 60081

Jean M. Jahnke, *CPDT-KA, BS*

Certified Professional Dog Trainer, Behavior Consultant, CGC Evaluator

Lecture 9am until 11am	Covers working with fearful/reactive dogs – reading body language, managing the environment, employing behavior modification and calming tools
Working Sessions Noon-5:30pm	8 Half-hour working sessions with a break in between to recap each session and for Q & A

Jean has been training dogs since the late 90s and has specialized in working with fearful, reactive dogs for over 10 years. She is a professional Member of the Association of Professional Dog Trainers, the Force Free Trainers of Wisconsin and the Pet Professional Guild.



Registration: Start Date **WAG Club Member** – April 1 **Non-member** – April 8th

Please email Patti Jo at whtbc10@wi.rr.com to reserve your spot. Once you receive an email back, if you got in, your payment and registration form will be due within two weeks. If not received within that time, the spot will re-open for others. Choose your options below:

WAG Club Member:

- Lecture only** (just morning session). Cost: \$50
- Audit entire day.** Cost: \$60, includes lunch.
- Entire day with one of the eight afternoon working spots.** Cost \$115, includes lunch.

Non-Club Member:

- Lecture only** (just morning session). Cost: \$65
- Audit entire day.** Cost: \$75, includes lunch.
- Entire day with one of the eight afternoon working spots.** Cost \$130, includes lunch.

All dogs not working must be crated. Those working must be crated until their turn.

Please bring your own chairs, mats, and crates.

CPDTs: Check here . This seminar is approved for 11 CEUs for certified trainers attending the entire day.

Name	
Address	Phone
City, State, Zip	Email

IMPORTANT: Please read and sign the waiver and cancellations policy form on the next page and return that, along with the bottom half of this page, with your payment once you have a reserved spot.

Waiver of Liability

I acknowledge that I have voluntarily applied to participate in dog training activities with WI-IL Agility Group (WAG) and Jean M. Jahnke. I am aware that there are risks and hazards involved with dog training, and I am voluntarily participating in the activities with the knowledge of these potential dangers. I am not relying on WAG or Jean M. Jahnke or any other person or entity to prevent such occurrences. In order to participate in all activities of this seminar, I agree to assume all risk of such occurrence.

I waive all claims or actions I may have against WAG or Jean M. Jahnke and agree to release WAG and Jean M. Jahnke from liability in any and all personal injuries to myself, my dog, children in my charge, or harm to property caused directly or indirectly by any acts that might occur in conjunction with this seminar. I also agree to assume sole responsibility for injury or damage caused by me, children in my charge, or by the dog I own or handle during participation in this seminar. I further indemnify, defend and hold WAG and Jean M. Jahnke harmless from any damage, loss, liability or expense including legal costs and attorney fees, which result from damage caused by myself, children in my charge, or the dog I own or handle.

Cancellation Policy

We will do our best to maintain an active waiting list. We do not guarantee a replacement for your spot if you find it necessary to cancel. There are no exceptions to our cancellation policy.

Your payment is non-refundable.

Your fees will only be refunded if your spot can be filled with an eligible participant.

I understand that there are NO EXCEPTIONS to the cancellation policy and agree to all terms. I understand that cancellation may result in my receiving no refund if my spot in the seminar cannot be filled from the waiting list.

I have read the cancellation policy and waiver of liability and I agree to all terms.

Signature _____ Date _____

Print name _____

Check Payable to **WAG**

Mail Payment, Registration and signed Cancellation form to Patti Jo Yuswak, 30724 114th St. Twin Lakes, WI, 53181

**Email questions to Patti Jo Yuswak at whtbc10@wi.rr.com