



Think Pawsitive LLC Summer Youth Camps

DOG TRAINING

Canine Connections Camp for Youth Ages 8-12

June 18-21, 2018, 8:30-11:30am

Youth will learn all about positive dog training, canine behavior and care, and canine sports! Crafts, games, and more!

Canine Sports Handling Camp for Youth Ages 10-14

June 25-28, 2018, 8:30-11:30am

Youth will advance their learning of positive dog training and canine behavior and care, and have the opportunity to develop their understanding and handling of canine sports including:

Agility, Tricks, Retrieval Games, Nose Work, and more!

Youth will also learn about different careers in the pet/animal industry!

For both camps, topics will also include:

*Leash Walking & Real-World Manners * How Do Dogs Learn? * How Do We Care for Dogs? * How to Stay Safe Around Dogs*

*** Youth will participate with the instructors' certified and experienced dogs.**

Benefits:

- Character development
- Improved self-esteem
- Leadership and Mentorship
- Appreciation for animals
- Interactive, hands-on learning
- Positive and motivational dog handling techniques
- Development of goal-setting skills
- An opportunity to make new friends
- Fun!

Cost: \$110

(Includes training segments, snacks, t-shirt, hand-outs, and certificate of completion)

A \$50 non-refundable deposit is due to hold your spot.

Enrollment will be accepted on a first-come basis. Enroll today - space is limited!

How to Apply:

Please complete the attached application and mail to: Think Pawsitive Dog Training LLC, 2485 S. Commerce Drive, New Berlin, WI 53151 or email to: sheila@thinkpawsitivedog.com

Questions? Please call Think Pawsitive at 262-641-9450 or email: sheila@thinkpawsitivedog.com

THINK PAWSITIVE SUMMER YOUTH CAMPS

DAY-AT-A-GLANCE

We have a very exciting day of fantastic activities planned! If you have any questions or would like more information, please contact Sheila at sheila@thinkpawsitivedog.com.

8:15	Parent Drop Off
8:30	Icebreaker and Jump Start Activity
8:45	Canine Connections Activity #1 or Sports Handling Activity #1
9:25	Break, Light morning snack
9:35	Craft (Canine Connections) or Training Lesson (Sports Handling)
10:00	Canine Connections Activity #2 or Sports Handling Activity #2
10:50	Canine Connections Activity #3 or Sports Handling Activity #3
11:20	Reflection/Wrap Up
11:30	Parent Pick-Up

OTHER INFO

THINK PAWSITIVE STAFF AND DOGS

All dogs involved in our camps are the instructors' own certified, experienced dogs. Youth will not be bringing their own dogs to this camp. All interaction with and handling of dogs will be under the supervision of staff at all times in a structured activity. A staff to student ratio of at most 1:8 will be maintained at all times.

WHAT TO WEAR

Youth should dress in comfortable, athletic, or casual attire. For safety purposes, only athletic shoes should be worn – no sandals or open-toed shoes will be permitted. All activities will take place indoors in an air-conditioned setting, so please have your child bring a light sweatshirt or sweater if needed.

SNACK

A light non-peanut/tree nut snack will be provided each day. Please notify staff if your child has allergies or any special dietary restrictions.

THINK PAWSITIVE SUMMER YOUTH CAMP APPLICATION: For Parent/Guardian

Please "X" which camp you are applying to:

____ Canine Connections Camp (ages 8-12)

____ Canine Sports Handling Camp (ages 10-14)

For Parent/Guardian to Complete

Child's Name _____ T-shirt size (youth sizes) _____

Child Date of Birth _____ Gender _____

Name of School _____ Grade in School _____

Parent(s)/Guardian(s) Name(s) _____

Home Address _____ City, State, ZIP _____

Parent/Guardian Email(s) _____

Parent(s)/Guardian(s) Home # _____

Parent(s)/Guardian(s) Cell # _____

Parent(s)/Guardian(s) Work # _____

Child's Health History

Does your child have any special medical or health concerns? If yes, please explain.

Has your child had any serious illnesses or injuries in the last year? If yes, please explain.

Please list your child's allergies or special dietary concerns, if any. (Please note that snacks with peanuts or tree nuts will not be served.)

Please list any medications your child is currently taking.

Date of most recent physical _____ Is your child current on all required immunizations? Yes ___ No ___

Child's Physician _____ Phone Number _____

Parent Permission, Media and Emergency Release, and Waiver

As the parent/guardian of the child listed on this application, I grant my permission for my child to engage in all activities provided in the Think Pawsitive Dog Training LLC Youth Canine Sports Program clinics. I confirm that my child is capable of participating in all activities. I understand that Think Pawsitive Dog Training LLC is not responsible for any lost or damaged items.

I grant my permission for Think Pawsitive Dog Training LLC to take photos and video footage of my child during the duration of activities that may be used for future promotional use. I give my consent for emergency medical care and/or hospital treatment to be administered in the event that I cannot be contacted or reached. I give consent in advance of specific diagnosis or treatment deemed necessary by an emergency physician or care provider.

All fees for service(s) are due by the start of service. Deposits are non-refundable. Acceptable forms of payment are: Visa, Master Card, check, or cash. Participant recognizes inherent risk in dog training or swimming a dog and realizes that a dog is a creature capable of and given to independent action. Participant assumes the entire risk and responsibility for property damage and personal injury, harm, or death that may occur to themselves or any guest they bring with them as a result of the actions or inactions of participant, another person, or certain canine behaviors included, but not limited to, biting, knocking over, jumping upon, transmittable diseases, or unpredictable reactions to drugs or medications whether caused by participant's dog or the dogs of other participants.

Participant agrees to fully release and forever discharges Think Pawsitive Dog Training LLC, its agents and employees, from any and all claims for loss, damage or injury to your dog(s) while in the care or on the premises of Think Pawsitive Dog Training LLC facility. Services such as: Dog Training, Seminars, Pool Use, Dog Wash, Rental use of facility areas/equipment or any other services or activities on the premises.

I accept the terms, conditions and policies of Think Pawsitive Dog Training LLC set forth by this agreement.

Print Name _____ **Signature** _____ **Date** _____

Permission for Child Pick-up

I give the following individual(s) permission to be called in the event of emergency that I (and additional parent/guardian listed above, if applicable) cannot be reached. I also give the following individual(s) permission to pick up my child in the event that I am unable to do so. (Please note that photo identification will be required as well as prior notification of change in pick-up.)

Name _____ Relationship to child _____

Phone #'s _____

Name _____ Relationship to child _____

Phone #'s _____

Print Name _____ **Signature** _____ **Date** _____

THINK PAWSITIVE SUMMER YOUTH CAMP APPLICATION: For Youth to Complete

Do you have a dog?

If yes: What is your dog's name and what kinds of things do you like to do with your dog?

If no: Have you spent time with dogs (family members' dogs, friends' dogs, etc.)? If so, what did you enjoy about it?

How do you spend your free time? What are your hobbies?

Why are you interested in participating in this camp?

What else would you like us to know about you? 😊

Print Name _____

Signature _____

Date _____

Thank you for applying to the Think Pawsitive's Summer Youth Camp!