CONNIE CLEVELAND-NOLAN SEMINAR

January 9–10, 2027

Merrimac Dog Training Club

Handler's Name: _____

Address: _____

Phone: _____ Email: _____

Dog's Breed: _____ Call name: _____

Age of dog: _____ Sex: ☐ Male ☐ Female ☐ Spayed ☐ Neutered

Dog's Titles: _____

Have you attended a Connie seminar in the past? ☐ Yes ☐ No

Are you a member of the Obedience Road? ☐ Yes ☐ No

Are you currently competing with this dog? ☐ Yes ☐ No If Yes, at what levels: ___

_____

What exercises are you currently working on? _____

_____

_____

Are you encountering any problems? ☐ Yes ☐ No If Yes, please list them: ___

_____

_____

What are your training goals?

_____

_____

Are there other issues you would like to address?

_____

_____

_____

PLEASE EMAIL COMPLETED FORM TO JULIE KOLBERG AT JKOLBERG@T2TRAINING.COM