



LL Gun Dogs, LLC
 Justin & Amber Lucas
 989 CR 3363
 Crockett, TX 75835
amberlucas0109@gmail.com

Training Contract

Training Contract Terms & Conditions:

Initial each item as proof of acceptance:

_____ 1.) I understand that I will be leaving my dog in the care of LL Gun Dogs, LLC for training; (Justin & Amber Lucas), the trainers, are not responsible for any injury, death, or loss of the dog.

_____ 2.) The dog will be highly cared for and fed the food recommended (Extreme Dog Fuel) unless the owner supplies the food monthly for said dog.

_____ 3.) LL Gun Dogs, LLC has the right to seek medical attention to the veterinarian of choice (**Dr. Cory Tucker, DVM-Southpine Animal Hospital 1300 S 4th St, Crockett, TX 75835- (936) 544-8788**) if deemed necessary at the owner's expense. (The owner will be notified prior to seeking any medical attention)

_____ 4.) I understand the cost of training is \$_____ per month. I enter into this contract with LL Gun Dogs, LLC, and understand that my training fees are due monthly once invoices are sent out. I understand if my payment is not received that the training for my dog will cease until services are paid for. **Cash or check** will be the only payment methods accepted.

_____ 5.) I understand that if I fail to uphold the monthly payment agreement with LL Gun Dogs, LLC that my dog may have a lien placed upon him/her until my balance owed is paid.

_____ 6.) In the event I have an outstanding balance owed to LL Gun Dogs, LLC and cannot afford the balance, I the owner, understand that LL Gun Dogs, LLC will assume responsibility and ownership of my dog including all registration documents, ect due to failure to pay for services rendered by LL Gun Dogs, LLC.

_____ 7.) I understand, that **all visits MUST be by appointment ONLY**. Appointments will only be scheduled Monday-Friday. No appointments will be scheduled on holidays.

_____ 8.) I understand, that it is encouraged that I make monthly visits (except during the month of force fetch) to learn how to handle my dog. I will spend the time the trainer feels necessary for me to learn the techniques in which my dog has been trained with.

_____ 9.) I understand, that I am required to complete an exit session before my dog will be released back into my care once the training has been completed so that I can correctly handle my dog based on its training.

Dog Information:

Name: _____ Breed: _____ Sex: _____

Microchip #/Tattoo: _____ Last dose of HW Prevention: _____

PLEASE MARK THE TRAINING YOU ARE INQUIRING FOR YOUR DOG:

_____ **Basic Obedience (2 month program)**

Includes:

- *Obedience (*basic commands such as: heel, sit, stay, here, and place*)
- * Collar Conditioning

_____ **Basic Gun Dog Training**

(4-5 month process depending on the dogs progression)

Includes:

- * Obedience
- * Collar Conditioning
- * Force Fetch
- * Steady to shot
- *Single marks, transitioning to doubles

_____ **Advanced Gun Dog Training**

(Must have completed the basic gun dog program)

Includes:

- *Whistle Sit
- *Swim-by
- *Basic T
- *Double T
- *Honoring another dog
- * Walk-ups & Diversions
- *Double & Triple marks

All packages include: Boarding, water, & food. Any additional vaccinations, heartworm/flea & tick prevention, or parasite treatments will be at the owner's expense.

PLEASE NOTE: A copy of the dogs vaccination record must be provided prior to drop off, or upon arrival to LL Gun Dogs, LLC property. We also ask that all dogs arrive with enough heartworm medication for length of stay.

Photography/videography Release: LL Gun Dogs, LLC utilizes photography/videography for advertising and owner updates. I consent to the use of photographs of my dog on LL Gun Dog, LLC platforms.

Initials: _____

Dog Information:

Name: _____ Breed: _____ Sex: _____

Microchip #/Tattoo: _____ Last dose of HW prevention: _____

Dog Owner Information:

Full Name: _____

Address: _____

Email: _____

Phone Number: _____

Alternate Phone Number: _____

On the date of, _____ I have entered into this training contract with LL Gun Dogs, LLC.

I understand the conditions outlined in this contract and agree to uphold the the trainers wishes. If I wish

Terminate services for whatever reason before the expected completion of training, I understand that LL

Gun Dogs, LLC will be made aware prior to pick-up/termination of services. I also understand that if I

choose to terminate services before the expected completion, that I should not expect a fully trained dog.

Payment for services up until termination date will be paid for prior to pick-up.

Signature of owner: _____ Date: _____

Signature of trainer: _____ Date: _____

Dog Information:

Name: _____ Breed: _____ Sex: _____

Microchip #/Tattoo: _____ Last dose of HW Prevention: _____



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GSP Disclaimer

As of 12/31/18 any GSP accepted into training at LL Gun Dogs, LLC will be required to have a training disclaimer signed prior to training services being rendered.

GSP's are a very versatile breed that can be trained for many different things if exposed early in life. Not all GSP's have the natural desire to retrieve and sometimes Cannot complete the gun dog program. We encourage GSP's that come into our program be affiliated with our genetics as we have had success with puppies from our litters. We have created this disclaimer so that the client understands that not all pointers can be trained for waterfowl and .

_____, I understand that not all GSP have natural retrieving ability/desire and that LL Gun Dogs, LLC is not responsible if my dog does not meet the standards of becoming a gun dog for whatever reason (lack of retrieving desire, dislikes water, ect.) I also understand that LL Gun Dogs, LLC will discuss options if they feel my dog will not make a retriever for whatever reason before training services cease.

_____ My GSP has been introduced to birds

_____ My GSP has been introduced to bumpers

_____ My GSP has retrieving interest

_____ My GSP has been introduced to water

Trainer Signature: _____ Date: _____

Client Signature: _____ Date: _____

Dog Information:

Name: _____ Breed: _____ Sex: _____

Microchip #/Tattoo: _____ Last dose of HW Prevention: _____