

**2012 Rattlesnake Avoidance Training Clinic for Dogs**  
**Hosted by Mountains Restoration Trust, a local conservation nonprofit organization**

March 17 & 18 and April 14 & 15  
Headwaters Corner, Masson House, 23075 Mulholland Hwy, Calabasas, CA 91302

And

May 12 & 13 and June 9 & 10  
Tapia Park, 884 North Las Virgenes Rd, Calabasas, CA 91302

Tracy Jenson-Presson of High On Kennels, San Diego County [www.highonkennels.com](http://www.highonkennels.com) personally trains each dog. Your dog must be at least 6 months old. Tracy has many years of training dogs to avoid rattlesnakes. The training is conducted in a safe, humane, controlled environment ensuring the safety of your dog, as well as the safety of the rattlesnakes. **Please allow 30 - 45 minutes for your appointment.**

In order to learn a strong avoidance behavior, Tracy recommends several repetitions of the training. The first year, "first time training" is when the dog learns intense avoidance of rattlesnakes. The second year, "return training" is what reinforces this behavior within your dog.

**Please reply promptly as space is limited. Advanced payment of \$70 per dog is required.**  
**No refunds after 7 days. For more information, please call at 818- 591-1701 ext. 2.**

**Please fill out the bottom form and mail with your payment to**  
**Mountains Restoration Trust, 3815 Old Topanga Canyon Road, Calabasas, CA 91302**

You can register and view maps online at [www.mountainstrust.org](http://www.mountainstrust.org)

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**Registration Form**

Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please indicate your 1<sup>st</sup> and 2<sup>nd</sup> choice for training dates and preference for a morning or afternoon appt. Once we receive your payment, we will do our best to satisfy your first choice. Confirmation of your date and time plus a map will be mailed to you.

First date choice \_\_\_\_\_ Second date choice \_\_\_\_\_ Morning \_\_\_\_\_ or Afternoon \_\_\_\_\_

Dog's Name	Breed	1 <sup>st</sup> Training?	or	Return Training?
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1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Payment method: Check \_\_\_\_\_ Credit Card (indicate which one): AMEX \_\_\_\_\_ VISA \_\_\_\_\_ MC \_\_\_\_\_

Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Name as appears on card \_\_\_\_\_

Signature \_\_\_\_\_