RAINBOW ANIMAL ASSISTED THERAPY
they train. they serve. they heal.

THERAPY DOG TRAINING CLASS – REGISTRATION FORM-5 Weeks

PRE-REGISTRATION REQUIRED-CLASS SIZES ARE LIMITED

Fee: $ 175.00 (one handler) $225.00 (two handlers/one dog)

Note: Completion of the class alone does not qualify the handler and dog for therapy work This class is designed for individuals to volunteer with their dogs in established Rainbow programs. After passing the class evaluation, individuals should be willing to join Rainbow and commit to volunteering twice monthly.

Please print clearly

Name (Must be 18 or older)	
Address	
City, State, Zip	
Phone/Email	**Phone:** **Email:**
Dog Information	***Your dog must be between the ages of one and eight to register for class and have lived with you for at least six months.***
Dog's Name	
Breed/Age	**Breed:** **Dog's Birthdate (month/year):**
Training Classes	***Please Describe:*** None, Obedience (Puppy, Beg, Inter, Adv), Rally, Nose Work etc.
Please Note:	**If you are planning to bring your dog to work with you, we DO NOT train dogs that work in facilities. If you are interested in having your dog offer you individualized support such as for PTSD or anxiety, we DO NOT train service or emotional support animals.**
Reason for taking the class	
Requested Location *Circle location choice.*	**Please check our website to ensure these locations are being offered for requested session. Need a six- dog minimum. Site date will be canceled if sessions cannot be filled.* **Morton Grove Glen Ellyn***
Requested Day/Dates/Time	**Day:** **Dates:** **Time**

INSTRUCTIONS: (Be sure all information on form above is filled in)

Please continue onto the second page for additional information .

1. **MAIL/EMAIL** your completed form and rabies certificate with a check payable to Rainbow Animal Assisted Therapy. You can also pay online at our website: www.rainbowaat.org and click the "Class" tab.

Rainbow AAT
6042 W. Oakton St. Morton Grove, IL 60053
ATTN: Therapy Dog Training Class or
EMAIL:dlh9127@comcast.net

****DON'T FORGET****
1. Registration form ***completely*** filled out and signed on back.
2. Attach rabies certificate (KEEP A COPY FOR YOUR RECORDS)

2. **READ THE FOLLOWING, INITIAL WHERE INDICATED, AND THEN SIGN BELOW**

- Due to the specialized training and the amount of material covered in this six-hour course, ***no classes may be missed.*** It is at the discretion of the instructor whether a make-up is available.
- Rainbow Animal Assisted Therapy reserves the right to dismiss or exclude any team from the Therapy Dog Training class.
- Dogs must be one year or older with a maximum age of eight and lived with their handler for at least six months prior to enrolling in Rainbow and taking the Registry test. Any exception to this policy must be approved by the Rainbow Board of Directors.
- Handlers should be willing to join Rainbow after completing the class and passing their evaluation and commit to volunteering with our organization.

Read and Initial all below:

- The majority of our programs are held during daytime hours Monday-Fridays with few opportunities during the evening or on weekends. _____ (**initial**)
- There is additional training required to work in a Rainbow hospital program. _____ (**initia**l)
- Rainbow requires that all new members undergo a criminal background check. _____(**initial)**
- In order to maintain working team status, all therapy volunteers need to be active for eight months of the year and accumulate 22 hours of service annually. _____(**initial)**
- Rainbow volunteers primarily work with children and adolescents, individuals with disabilities, and hospital patients. _____(**initial**)

► SIGNATURE OF REGISTRANT _____

DATE:_____

For office use only

CHECK NO. _____ **or ON-LINE** **AMOUNT $** **RABIES:**

9.29.26/effective 1.1.27