

Spring 2010



Dear Students and Parents:

**Assistance Dogs of the West Spring 2010 After School Assistance Dog Student Trainer Classes begin again in Santa Fe the week of January 4, 2010.**

Santa Fe middle and high school students, ages 8 to 18, have been having fun and developing leadership skills while helping train ADW dogs for people with disabilities since 1995. In our classes, students learn some very important and useful lessons through working with dogs. Here's a short list of the skills and abilities student trainers learn and develop in ADW assistance dog training classes:

- **Dog/Human Relationships: Consistency Builds Trust**
- **Basic Obedience Training: Use of the Positive**
- **Dog Behavior in Public: Dog Socialization**
- **Basic Commands for Assistance Dogs: What Assistance Dogs do for People with Disabilities**
- **Differing Ability Awareness: Learn About Our Clients**
- **Building Loving Relationships and Letting Go: Emotional Growth**
- **Community Service: How We Help Others**
- **Communication Skills: Clarity, Self Advocacy, Assertiveness**

Spring 2010 After School Assistance Dog Student Trainer classes begin Wednesday, January 6<sup>th</sup>. (Monday classes at Rio Grande Elementary School begin January 11<sup>th</sup>.) Please see the attached registration forms for specific class times and costs. There are two federal holidays this semester: Martin Luther King, Jr. Day, on Monday, January 18<sup>th</sup> and Presidents' Day on Monday, February 15<sup>th</sup>. There will be no classes on these days or during Spring Break week for ADW which is March 8th through March 12th.

If you are at least 8 years old, and have an interest in doing something fun, rewarding and different with your after school time, please read, fill out and return the enclosed ADW After School Program registration forms along with your payment to the ADW office.

Classes are limited to only ten students per class. Please call the ADW office at 505-986-9748 or email [info@assistancedogsofthewest.org](mailto:info@assistancedogsofthewest.org) if you have any questions.

We hope to see you in an ADW After School class this spring!

Thanks for your interest.

Carolyn Clark Beedle  
Executive Director



P.O. Box 31027 • Santa Fe, NM 87594 • 505-986-9748

**SANTA FE PROGRAM REGISTRATION FORM**  
**Winter/Spring 2010**

Students enjoy hands-on learning with ADW professional assistance dog trainers. Class curriculum includes: training in classroom settings and in the field; leadership, assertiveness and communication skills, basic dog obedience training, service-dog commands and skills, public access training, disability awareness education and community interaction. All student trainers must be **at least 8 years old**.

Student Name: \_\_\_\_\_

Parent 1/Guardian Name: \_\_\_\_\_

Parent 2/Guardian Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Student Birthday: \_\_\_\_\_

**Contact Phone Numbers – PLEASE Mark Primary Contact**

Home	Parent 1 Cell	Parent 1 Work	Parent 2 Cell	Parent 2 Work	Other

Winter/Spring 2010 Class Schedule: January 4 to May 13, 2010  
 Spring Break (no after school classes): March 8 to March 12

<p><b>*Mondays 3:30 – 5:15</b>            Rio Grande School            715 Camino Cabra,            Santa Fe</p>	<p><b>Wednesdays: 3:30 – 5:15</b>            La Mariposa Montessori            18 Puesta del Sol,            Santa Fe</p>	<p><b>Thursdays: 3:30 – 5:15</b>            La Mariposa Montessori            18 Puesta del Sol,            Santa Fe</p>
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- Sign up to attend class one day a week (Monday, Wednesday or Thursday) for a minimum of one month. **Submit registration forms to the ADW office** at the P.O. Box at the top of the page.
- Wednesday and Thursday classes at La Mariposa Montessori will start January 4. **\*Mondays at Rio Grande will start January 11.** Classes continue through May 13.
- There is a limit of 10 students per class. We fill classes on a first-come/first-serve basis. We will confirm your slot as soon as we receive your registration form. No phone reservations.
- La Mariposa Montessori is located at 18 Puesta del Sol, Santa Fe, near I-25 and Old Pecos Trail.
- Rio Grande School is located at 715 Camino Cabra, Santa Fe, near Atalaya Park.
- There will be no class on Monday, January 18 in observance of Martin Luther King, Jr. Day, or Monday, February 15 in observance of Presidents' Day.
- No class Spring Break week: March 8 to March 12, 2010

**PROGRAM FEES AND PAYMENT INFORMATION**

Please review the costs for Spring Programming and indicate which day(s) and month(s) your child will be attending:

	January	February	March	April	May
Mondays	\$60	\$90	\$120	\$120	\$60
Wednesdays	\$120	\$120	\$120	\$120	\$60
Thursdays	\$120	\$120	\$90	\$150	\$60

Please complete payment information. (If paying on a monthly basis, payment is due no later than the 1<sup>st</sup> of each month.)

**Payment Method:**

\_\_\_ **Check Enclosed**

\_\_\_ **Credit Card**

- Please make all checks payable to: Assistance Dogs of the West  
P.O. Box 31027  
Santa Fe, NM 87549

- Credit Card Information:

Circle C.C. Type:      Visa / MasterCard / Amex

C.C.# \_\_\_\_\_ Expires: \_\_\_\_ / \_\_\_\_

Name on card: \_\_\_\_\_

I AUTHORIZE **Assistance Dogs of the West** TO CHARGE MY CREDIT CARD FOR \$ \_\_\_\_\_  
FOR SPRING 2010 ASSISTANCE DOG TRAINING CLASSES.

Signature: \_\_\_\_\_

Would you like us to automatically charge this card at the beginning of each month?    YES    NO

**All payments are FINAL: if a student misses a class, there are no refunds and the student may not attend another day as a make-up session.**



## EMERGENCY INFORMATION

Student name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Child lives with: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Other phone: \_\_\_\_\_

Father's name: \_\_\_\_\_ wk#: \_\_\_\_\_ cell: \_\_\_\_\_

Mother's name: \_\_\_\_\_ wk#: \_\_\_\_\_ cell: \_\_\_\_\_

My child has the following health problems/disabilities (for example, allergies, bad knees, diabetes, asthma, seizures, heart problems, etc.) \_\_\_\_\_  
\_\_\_\_\_

My child has the following allergies: \_\_\_\_\_  
\_\_\_\_\_

My child requires the following medications/action for allergic reactions: \_\_\_\_\_  
\_\_\_\_\_

My child may take non-prescription pain medication if the need arises \_\_\_\_ Yes \_\_\_\_ No

**EMERGENCY CONTACTS:** (Must be 2 individuals other than parents or step-parents)

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

I, \_\_\_\_\_, authorize Assistance Dogs of the West to seek medical attention for my child, \_\_\_\_\_, in case of an emergency.

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Health Insurance Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

In the case of a medical emergency, I authorize the staff of Assistance Dogs of the West to contact 911, and have my child transported to the nearest hospital.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Assistance Dogs of the West  
Media Authorization and Release**

For (Student Name): \_\_\_\_\_

Subject to the terms and conditions set forth in this Agreement, I, \_\_\_\_\_  
do hereby authorize Assistance Dogs of the West, its successors and assigns, and those acting under its  
permission and on its authority to copyright, use, and publish for:

- art
- sales materials
- advertising
- promotion, packaging, or trade
- any other lawful purpose whatsoever
- articles written or comments made by me
- photographs, pictures, portraits,
- images of me and or my dog(s) or other animal(s)
- in conjunction with my/our own fictitious name
- reproductions thereof in color or otherwise, made through any medium
- Film
- Video
- Print
- Website

Any and all comments made by me are provided to Assistance Dogs of the West without receipt of any  
promise of consideration.

The undersigned warrants that he/she has full power and authority to grant all of the rights conveyed  
there under and hereby waives any right that he/she may to inspect or approve the finished product or  
the advertising or other copy that may be used in connection therewith or the use to which it may be  
applied. The undersigned further agrees that this authorization and release binding upon his/her heirs,  
executors, administrators, successors and assigns.

The undersigned warrants that he/she is of full agreement and has every right to contract in his/her own  
name in the above regard, and further that he/she has read the above authorization and release, prior to  
its execution, and that he/she is fully familiar with the contents thereof.

Signature \_\_\_\_\_ Date \_\_\_\_\_

If the person signing is a minor, then parent or legal guardian must sign below.

I, undersigned, hereby consent to the foregoing conditions and warrant that I have the authority to grant  
such consent.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## **Release From Liability**

I indemnify and hold Assistance Dogs of the West harmless from and against all claims, losses, liabilities, and damage to persons or property, governmental charges or fines and attorney's fees arising out of the acts or omissions of Client Placement Training, Owner/Self Training Workshops, ADW Student Trainer Classes and meetings, Seminars, Meetings, After School and Summer Dog Training Programs, or any gathering sponsored by or conducted at Assistance Dogs of the West offices, including but not limited to interactions with instructor/trainers, attendees, or animals, demonstrations involving an assistance dog, or transportation of assistance dogs to or from training sites or within the training site.

Signature \_\_\_\_\_

Date \_\_\_\_\_