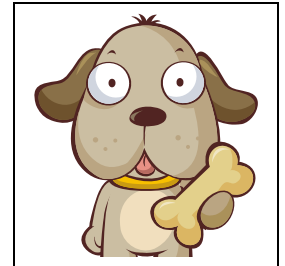


Contacts:
Deb Brown
860-378-1286

Southington Care Center

45 Meriden Avenue
Southington, CT 06489
(860) 621-9559



Delta Society Pet Therapy Class Application

Please print or type clearly

Date: _____

HANDLER'S INFORMATION

Name: _____ Phone: _____
Last First

Address: _____
Street Town Zip Code

Birthdate: _____ (*required) E-mail _____
Mo/day/year

Occupation: _____ Employer: _____

Emergency Contact: _____ Phone: _____
Name Relationship

Family Physician: _____ Phone: _____

Have you been convicted of a felony or imprisoned for any reason? Yes No

If yes, please explain on a separate piece of paper. Include all pertinent information.

PET INFORMATION

Dog's Name: _____ Breed: _____

Age: _____

Has your dog had obedience training? _____

Is your dog currently registered by Therapy Dog, Inc. _____ or Delta Society _____

*****REQUIRED**

Please attach veterinary paperwork attesting to the health of your dog, including Immunization Schedule and Proof of Rabies Vaccination.

Applicant Signature

Date

Spring 2010
Therapy Dog Class Dates held at Southington Care Center
Rehab gym

Therapy Dog 1: Thursdays March 4th, 11th, 18, April 1, 8th
Therapy Dog 2: Thursdays April 29th, May 6th, 13th, 27th and
June 3
Classes meet 6:00-7:00 pm

Delta Testing will take place on Sunday, June 6th

Each class costs \$90 for a total of \$180. Participants are also required to purchase a manual from the instructor (\$40). Participants should take both Therapy Dog 1 and Therapy Dog 2 Classes. Being excused from the Therapy Dog 1 class is at the discretion of the instructor.

Applications complete with payment for the Therapy Dog 1 class (\$90), and pet health forms will be accepted on a first come, first serve basis. Deadline for applications is Friday, February 26th. Please make checks out to the instructor, "Sally Sizer". Please send to Southington Care Center, 45 Meriden Avenue, Southington, CT 06489 Attn: Deb Brown-Pet Therapy.

***The Jane Haze Memorial Pet Therapy Fund may reimburse the costs of the classes if you and your dog pass the Delta test. Once your dog is registered with the Delta Society, if you are interested and accepted into our Volunteer Program (at Southington Care Center, Mulberry Gardens, The Orchards, Jerome Home, Arbor Rose, or The VNA of Central CT), you will need to commit to 1 year of service to receive full reimbursement. In the event that you and your dog pass the coursework and evaluation, you will receive 50% reimbursement after 6 months of service and the remaining balance after 1 year of service. You and your dog must make a minimum of 2 visits each month to fulfill the obligation.*