



2001 Municipal Court
 Harrison City, PA 15636
 724-744-2171, ext 204/205
 724-744-2172 fax

Mon-Fri, 9:00am-4:00pm
 www.PTARC.org
 Facebook.com/ptrecreation

Puppy Training

Ages 18 & up-and one child may attend with adult Dog age: 3-6 months

Positive reinforcement training methods. Dogs will learn the foundation for sit, down, come, touch, watch me, and loose leash walking. Humans will learn to encourage appropriate play and deal with common problems such as jumping, house breaking, mouthing and more! Socialization playtime included! Handouts provided. Please bring vaccination records, flat collar, 6 ft. nylon or leather lead, and lots of soft treats. First class orientation for humans only (no dogs attending except 1st class which will be held at the Penn Township Municipal Building-no dogs attending) will be held at the Penn Township Municipal Building.

Instructor: Sandy Strychor, ABCDT

Location: Penn Township Municipal Park, DiDomingo Pavilion, above fields 6 & 7 (except 1st class which will be held at the Penn Township Municipal Building)

Time: Wednesday, 6:30-7:30 pm

6 week session: April 17, 24, May 1,8,15 & 22

Fee: PTSD Residents, \$59; Non-residents, \$67



Basic Dog Obedience & More

Ages 18 & up and one child may attend with adult Dog age: 4 months and up

Positive reinforcement training methods. Dogs will learn sit, down, stay, come, leave it, and loose leash walking. Humans will learn to

encourage appropriate play and deal with common problems such as jumping, barking and mouthing. Playtime included!

Handouts provided. Please bring vaccination records, flat collar, 6 ft. nylon or leather lead, and lots of soft treats. First class orientation for humans only (no dogs attending) in the Penn Township Library.

Instructor: Sandy Strychor, ABCDT

Location: Penn Township Municipal Park, DiDomingo Pavilion, above fields 6 & 7 (except 1st class, that will be held in Penn Township Library-no dogs attending)

Time: Monday, 6:30-7:30 pm

6 Week Session: April 15, 22, 29, May 6, 13 & 20

Fee: PTSD Residents, \$59; non-residents, \$67



PTARC 2019 Puppy Training & Basic Dog Obedience & More

Name _____

Address _____

City _____ Zip _____ Birthdate _____

Email Address _____

Please circle where you live: Penn Borough Manor Trafford Penn Township Non-Resident

Primary Phone _____ Alternate Phone _____

Program name: _____ Time: _____

Medical / allergy Considerations _____

Adult participant signature required below. Parent signature required below for all participants under the age of 18.


The undersigned individual (parent or guardian if under age 18) represents that the registrant is in good health and can participate in the above listed activity and with prior knowledge of the physical nature of the activity releases Penn-Trafford Area Recreation Commission (PTARC), and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees from any and responsibility for injury to the registrant through negligence or otherwise while he/she is participating in the activity. The parent, guardian, or participant assumes all risks inherent in the activity and will hold the Penn-Trafford Area Recreation Commission and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees harmless from any and all claims or causes of action that may arise from this activity. The undersigned individual also hereby gives permission to Penn-Trafford Area Recreation Commission to use photographs of the participant for the promotion of Penn-Trafford Area Recreation events and programs. The participant agrees to hold the Penn-Trafford Area Recreation Commission, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees free and harmless from liability of any nature.

*PARENT or Guardian SIGNATURE _____

DATE _____

ONLINE REGISTRATION AT WWW.PTARC.ORG

****Pre-Registration required**-If you would like to pay by credit card visit our website at www.ptarc.org**


 Clip here, save the top
 for your information,
 return bottom portion.
 Make checks
 Payable to PTARC
 Please mail to:
 PTARC
 2001 Municipal Ct.
 Harrison City, PA
 15636