



The All Terrier Club of Western Washington is pleased to sponsor
Tom & Kay Lams' All Breed, 8 hour Dog Training & Handling Workshop

November 7th or November 8th 8:00 AM to 5:00 PM Because only 20 dogs are allowed per workshop we are sponsoring two days for you to choose from. This workshop will be given at The Academy of Canine Behavior 4705 240th St. SE, Bothell, WA 98021.

❖ Come experience a new bond and positive connection with your dog, which works for conformation and all other dog activities. ❖ It's easy, fun and instantly gratifying for you and your dog. ❖ Prevents almost all common behavior problems ❖ Cuts training time in half with twice the results ❖ Teaches you to consistently use a "language" that your dog has known since it was 6 weeks old ❖ Makes you acutely aware of your dog's reactions ❖ Focuses your dog upon you.. and you alone ❖ Restores animation and willingness-to-please ❖ Lessens mutual nervousness, anxiety and tension ❖ Builds self-confidence and a positive attitude ❖ Empowers you to "act", rather than "re-acting" ❖ Clears your head for "in-the-ring decision making" ❖ Builds a partnership between you and your dog that awards you both, the "FREEDOM TO WIN"

BELIEVE IT OR NOT!

The Lams teach successful techniques for:

Lagging	Low back	"Owner-itus"	Cutting	Breaking
Crabbing	Toeing in	Sitting	corners	stack
Swerving	Too long	Rear-syh	Crossing over	Tail tucking
Prancing	Not focusing	Collapsing	Veering away	Roached loin
Pouting	Too "Cutsie"	Pinned ears	Jumping up	Splayed toes
Barking	Forging	Cow hocks	Ring sour	Bad topline
Timidity	Pacing	Toeing out	Refusing to	Bait snatching
Leaning	Galloping	Too short	Walk	Lead grabbing
Slinking	Silliness	Oversexed	Fear of judges	
Pegging	Stubbornness	Hyperactive	Touch evasion	
Head down	Growling		Mouth-shy	

Send Registration forms to: Joan Herstein
 1359 Country Club Dr.
 Camano Island, WA 98282

Fees: \$125.00 per Participant (an active trainee with one dog only – receives a free booklet)
 \$45.00 per Auditor Prices are per day with lunch provided

Registration is on a first come first paid basis. *Please indicate what day you would like to attend and if you would attend the second day if your first choose was full.*

You may check availability: joanshome2@aol.com

November 7th

November 8th

Participant

Auditor

Name _____ Phone (____) _____
 email _____

Mailing Address _____ City _____

State _____ Zip _____ Dog's Breed _____ Call Name _____

Dog's Sex _____ Dog's Age _____

Total Fees Enclosed \$ _____ Signature _____
 (Your signature or if you are under 18 years of age your guardians signature)