

Pet Information:

Pet's Name: _____

Client # _____ Breed: _____ Sex: M / F

Birthday/Age: _____ Weight: _____

Owner Information:

Name: _____ Address: _____

Email: _____ Phone #: _____

Emergency Contact:

Name: _____ Phone #: _____

****The following questions about your dog are important for us in caring for them and the other dogs in our care. Please be as honest and detailed as possible. Feel free to use the back of these pages if needed, Thank You****

Pet Personality Profile:

Is your dog: spayed / neutered / No (circle one)

Where did you get your dog? _____

If adopted, do you have any knowledge of your dog's history? _____

How does your dog do with Children? _____

How does your dog do with other dogs? _____

Please list any other animals your dog lives with: _____

Health/Grooming:

Do you use a flea treatment? No / Yes Brand: _____

Does your dog have any allergies? No / Yes Please List: _____

Does your dog like: Nail Trims? No / Yes

Being Brushed? No / Yes

Bath? No / Yes

Does your dog have any sensitive areas on his/her body? _____

Can you list any restrictions on activities or movement for your dog? _____

Behavior:

Is your dog afraid of any noises, specific items, people or animals? No / Yes

Please List: _____

How does your dog react to strangers coming into your home or yard? _____

Does your dog ever bark or growl at anyone passing outside your home or yard? _____

Has your dog ever:

Growled at someone? Yes / No

Bitten anyone? Yes / No

If you answered yes, please describe the circumstances: _____

Does your dog have any problems in the following areas? (If so please explain)

Mouthing: No / Yes

Housetraining: No / Yes

Barking: No / Yes

Digging: No / Yes

Jumping: No / Yes

Climbing chain link: No / Yes

Other:

Has your dog ever growled/snapped at anyone who has taken his/her food or toys away from them? No / Yes (Please explain) _____

Has your dog ever shared toys or food with other animals? No / Yes

Does your dog play with toys? No / Yes

Has your dog had any formal obedience training? No / Yes (If yes, when and where?) _____

What commands does your dog know? _____

Comments about your dog which you feel might be helpful: (Please use other side)

Microsoftword/DCBQuestionnaire