



Application

Client's Name: _____ Phone _____

Pet's Name: _____ Breed: _____ Age: _____ M / F / Spayed / Neutered

Pet History

1. Why are you choosing a daycare program?
2. Did you rescue your dog from a shelter, rescue group, or as a stray?
3. Has your pet ever been attacked by another animal? Describe breed, circumstance, and how it has effected them:
4. Has your dog ever bitten or nipped at anyone or another dog?

Behavior

5. How does your dog interact with other dogs?
6. Describe your dog's socialization level.
 - None: no knowledge of other dog interaction
 - Minimal: on leash encounters only
 - Moderate: some off lead playtime on occasion with friends dogs
 - Extensive: regular visits to social events, dog parks, daycare, group walks
7. What is your dog's style of play with other dogs?
 - My dog doesn't play with other dogs
 - Loves to chase and be chased
 - Loves to chase but doesn't like being chased
 - Wrestle and mouth play
 - Likes to observe and follow

Describe other:

8. Has your dog had formal obedience training? If yes, when and where?
9. What commands does he or she know?
10. Level of use of obedience cues:
 - Not applicable
 - Rarely used
 - Used occasionally to better control behavior
 - Used on walks or with people in the home
 - A key part of daily communication
11. Has your dog ever participated in daycare groups?
12. Are there any ages, types or breeds that your dog seems to fear or dislike?
13. How does your dog act to others while on a leash?
14. Has your dog ever growled or snapped at any person or animal for taking his/her food or toys away?
15. Has your dog bitten any person or animal? If yes, what were the circumstances and describe injury:
16. Has your dog ever climbed or jumped fencing or escaped from house or yard?
17. Does your dog jump up on you or others? If so, what command do you use to correct?
18. What does your dog do to show he/she is happy?
19. What does your dog do to show he /she is upset?
20. Is he/she allowed on furniture at home?

21. Does your dog have issues with any of the following:

- Mouthing
- Housetraining
- Barking
- Digging
- Ignoring command

Please describe:

22. Has your dog chased small animals, or chased someone on bicycle or skateboard?

23. What kind of toys does your dog like?

Health

24. Does your dog have any allergies?

25. Physical / medical conditions?

26. Medicine and dosage?

27. Describe your dog's flea/tick prevention program:

28. Is your dog frightened by loud noises?

29. What type of surface does your dog prefer to go to the bathroom? (e.i. grass, potty pads, gravel etc.)

30. List any bathroom related issues or concerns:

31. Does your dog enjoy being brushed?

32. How does your dog react to having his/her nails clipped?

33. Does your dog have any sensitive areas on their body?

34. Check what best represents your dog's exercise level:

- Couch Potato: Spends days sleeping, occasional walks
- Mild Exercise: short daily walks, regular playtime
- Moderate exercise: long or multiple daily walks, regular playtime
- Athlete: regular jogs or runs, participates in dog sports like frisbee, flyball, agility

Household and Behavior

35. Describe other pet in the house and their relationship:

36. How many children are in the home? How does the dog interact with children?

37. How does he/she react to strangers coming in to your home or yard?

38. What is your routine when you come home to your dog?

39. Is your dog destructive when you are away?

40. Other comments: