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*** Please fax or mail this form back for consideration**

Human's Information

Name _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____

Email Address _____

Where did you hear about us? We like to reward our referrals!! _____

Are you applying for: Daycare ___ Boarding _____

Daycare days per week requested: **M T W Th F** or boarding dates requested _____

Emergency Contact Information

Name _____ Phone _____

Vet's Name _____ Phone _____

Dog Profile

Dog's Name _____ Dog's Sex _____ Spayed or Neutered? _____

Dog's Breed _____ Dog's Age _____ Dog's Birthday _____

Do you have children in the household? _____

Is your dog mouthy or does he nip at you? _____ Is your dog house trained? _____

Does your dog bark a lot? _____

What brand of food does your dog eat? _____ How many feedings per day? _____

Is your dog allowed to have treats? _____ If so what kind? _____

Does your dog take medications? _____ If so, for what? _____ How often? _____

Does your dog have any past injuries or any current conditions? _____

Does your dog dig? _____

Is your dog frightened by any noises? _____

Is your dog frightened around anything else? _____

What happens when you or somebody else tries to take food or toys from your dog? _____

Does your dog share well? _____

What kind of toys does your dog like? _____

Does your dog get along well with other dogs? _____

Does your dog prefer to play with any specific breed or size of dog? Male or Female? _____

Has your dog had obedience training? _____

What commands does your dog know? _____

Does your dog have good recall? I.e.: Does he/she come when called? _____

Is your dog good off leash? _____

Does your dog have a bathroom command? _____

Does your dog have any sensitive areas on the body? _____

Where does your dog like to be petted? _____

Does your dog like baths/brushing? _____

How does your dog react to strangers? _____

Are there any types of people that your dog automatically dislikes or fears? _____

How does your dog react to puppies? _____

Rate your dog's energy level "1" being very mellow and "10" being extremely energetic _____

Does your dog show any destructive behaviors when you aren't at home? _____

Is your dog aggressive on leash? _____ Off leash? _____

Do you walk your dog often? _____

Does your dog jump up on you? _____ On others? _____

Does your dog growl? _____ Is it a play growl or a warning growl? _____

Has your dog ever bitten anybody? _____ If so, what were the circumstances? _____

Has your dog ever jumped or climbed over a fence? _____ How high was it? _____

Is your dog crate trained? _____

Has your dog ever attended daycare/boarding before? _____

Does your dog have separation anxiety? _____