

CLIENT HISTORY

Owner's Last Name: _____ Owner's First Name: _____
 Additional Owners Last Name: _____ Additional Owner's First Name: _____
 Employer: _____
 Home Street Address: _____
 City: _____ State: _____ Zip: _____
 Email Address: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Emergency Contact Name: _____ Emergency Contact Phone: _____

Pet Information

Your Dog's Name: _____ Dog Breed: _____ Age: _____
 Dog DOB: ____/____/____ Gender: Male / Female Neutered State: Spayed / Neutered

Can we give your dog treats? Yes No

Veterinarian Information Rabies Due: _____ Distemper/Parvo Due: _____ Bordetella Due: _____

Veterinarian Office Name: _____ Doctor Name: _____

Address: _____ Phone: _____

Medical/Health Issues: _____

TELL US ABOUT YOUR DOG

Please fill out the following questions honestly. Please note, answers to the questions below do not determine your dog's eligibility into Doggy Office's daycare program.

How old was your dog when he/she became a member of your family: _____

Other than the dog you are enrolling in daycare, what other dogs do you have in your home? _____

Where did you get your dog (rescue, private breeder, pet shop)? _____

Did your dog attend puppy class? Yes No Did your dog attend obedience classes? Yes No

Do you use a crate? Yes No Has your dog ever been to a dog park? Yes No

Has your dog ever climbed a fence? Yes No

Has your dog ever exhibited any aggression (excessive barking, growling, snapping, snarling) in any of these circumstances:

Around children Yes No, At the Vet Yes No If yes, please explain: _____

Is your dog shy of men? Yes No women? Yes No

Has your dog ever guarded a toy or food from you or anyone else? Yes No

Is your dog ok with being handled or touched in all parts of his body including looking in his mouth? Yes No

Feet? Yes No If not, please explain: _____

Does your dog dislike a certain kind of person? If so please explain: _____

Has your dog ever been in a dogfight? Yes No, Has your dog ever been attacked? Yes No

Does your dog exhibit shyness, (tucked tail, submissive urination) when in the presence of dogs? Yes No

Does your dog seem afraid in the presence of certain breeds or sizes of dogs? Yes No

If so please explain: _____

Does your dog seem to tolerate one sex better than another? Yes No

Does your dog need a little time to warm up to other dogs? Yes No

In your opinion does your dog enjoy playing with others? Yes No

How does your dog tolerate puppies? Happy to see puppies Doesn't like puppies I don't know

How does your dog like strangers? My dog likes everybody My dog dislikes strangers I don't know

Tell us about any other behavioral issues your dog may have or any other likes or dislikes: _____