



Pet Profile *(please print one for each pet)*

OWNER INFORMATION

Name: _____

Home Phone: _____ Cell: _____ Email: _____

Pet's Name _____ Breed _____

Sex (mark one): Female Spayed Female Male Neutered Male

Color: _____ Age: _____ #of years and _____ months Birthdate (if known) _____

My Pet is from a: Breeder Store Rescue Stray Other _____

I have had my pet for _____ # of Circle one: DAYS WEEKS MONTHS YEARS

Has your pet been boarded before? Yes No If yes, please explain: _____

Describe your pet's typical activity level: Low Medium High

PET DIET & EATING BEHAVIORS:

Name of food: _____

Is your dog a hearty eater? Yes No _____

What is your dog's usual meal and treat schedule? _____

Does your dog get aggressive if other dogs are around when they are eating? Yes No

If yes, please explain: _____

Does your dog have a tendency to eat things they shouldn't? Yes No

If yes, please explain: _____

What are your dog's favorite snacks? _____

Does your dog have any food/treat restrictions? _____

MEDICAL INFORMATION

Does your pet have allergies such as grass, etc.? Yes No

If yes, please explain: _____

Does your pet have *food* allergies?

If yes, please explain: _____

Does your pet have any old or current injuries or health concerns? Yes No

If yes, please explain: _____

Does your pet suffer from any chronic ailments or diseases such as Arthritis, Diabetes, Heart Disease, Seizures?

If yes, please explain: _____

Is your pet taking any medications(s)? Yes No

If so please list medications(s); dosage and reason: _____

Are there restrictions on your pet's movements? Yes No

If yes, please explain: _____

TRAINING/BEHAVIOR

Has your pet had obedience training? Yes No If so was it In-home Group Class Private Training

What commands does your dog know? _____

How do you get your dog to drop something? _____

Does your dog come when called? Yes No

What motivates your dog? (i.e.: food, toy, etc.) _____

Does your dog have a nickname? Yes No If so, what is it? _____

Is your pet house trained? Yes No

Is your pet crate trained? Yes No

Does your dog tend to urine mark? Yes No

Has your pet ever bitten a person? Yes No

If yes, please explain: _____

Has your pet ever bitten another dog? Yes No

If yes, please explain: _____

Check all that describe your pet's personality:

- Outgoing Verbally Sensitive Pushy Reserved Aggressive Playful Affectionate
Mouthy Excitable Afraid of Men Fence Jumper Protective Chewer

TRAINING/BEHAVIOR cont.

Check all that describe situations where your pet may become unfriendly:

- Grabbing Collar Petting Touching Paws Touching Ears Touching Tail Around Other Dogs
Touching While Sleeping Eating Other _____

Check all answers that apply if your pet has unfriendly behavior:

- Will Bite May Bite Growls Snaps Freezes Trembles Backs or looks Away Urinate/Defecate
Vocalize

Does your pet engage in any unusual obsessive, compulsive or repetitive behavior? Yes No

If yes, please explain: _____

Is your dog an escape artist? Yes No

If yes, what is their best trick for getting out? _____

Has your dog ever shown separation anxiety currently or in the past? Yes No If so please explain
circumstances (where, when, etc.) _____

If yes, how do they act out? _____

What do you do, or have done in the past to help comfort your dog? _____

Does your dog have any quirks that are normal behavior for them, or specific tendencies? (e.g., funny noises they make) If so, what are they? _____

Does your dog have any "naughty" behaviors, e.g., getting into the trash, chewing on shoes or other items, etc.?

If so, what are they? _____

How does your dog do with other dogs? _____

...any problems in the past, if so what were they? _____

TRAINING/BEHAVIOR cont.

Does your dog have any aversion or preference for certain types of people (i.e. male/female, children/adults)

If so, what are they? _____

Does your dog have any special fears i.e. fireworks etc.? _____

What, if anything tends to help? _____

Does your dog like car rides? Yes No Where do they usually sit? _____

Do they have a tendency to jump around in the car? Yes No

ROUTINES

What does your dog tend to do when they need to go potty? (ie: whine, go to the door, potty indoors?) _____

What are your dog's potty habits? _____

Does your dog potty on command? What do you say to signal them to go? _____

What is your dog's usual routine for walks, exercise and outings? _____

Is your dog used to being left alone at your house? _____

If so, for how long and at what times? _____

What times does your dog usually wake up? _____

HOME AND FAMILY

Where does your dog usually sleep? _____

Is your dog crate trained? _____

Why does your dog go/get put in crate? _____

How long does your dog stay in crate? _____

Is your dog allowed on the furniture at home? Yes No

Is your dog accustomed to... Children? Yes No Cats?: Yes No Other Pets?: Yes No type_____

HOME AND FAMILY cont.

Does your dog have any favorite toys or games? Yes No

If so, what are they? _____

ANYTHING MORE YOU WOULD LIKE TO SHARE

Any additional information you would like to share about your pet? _____
