

NEW CLIENT APPLICATION		
Name of Pet Parent:		Phone Number:
Email Address:		
Street Address:		
City:	State:	Zip:
Name of Pet:	Sex: <input type="radio"/> Male <input type="radio"/> Female	Altered: <input type="radio"/> Yes <input type="radio"/> No
Species:	Breed:	Age or D.O.B.:
Color Markings:		
Approx. Weight (Whole Numbers):		How long have you had your dog?
Veterinarian Name:		Company:
Vet Phone Number:		Vet Location:
Feeding Schedule - How Much and How Often:		
Does your dog have food allergies? If yes, please explain: <input type="radio"/> Yes <input type="radio"/> No		
What services are you interested in? <input type="radio"/> Lodging <input type="radio"/> Daycare <input type="radio"/> Training <input type="radio"/> Grooming		
Please describe your dog's flea/tick control and prevention program:		
Does your dog have any physical disabilities or sensitive spots? If yes, please explain: <input type="radio"/> Yes <input type="radio"/> No		
What restrictions need to be placed on your dog's activities or movements? <input type="radio"/> No jumping <input type="radio"/> No running <input type="radio"/> No hard play <input type="radio"/> No contact with other dogs <input type="radio"/> None		
Aggressive Behaviors		
Is your dog food-aggressive? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> I don't know	Is your dog people-aggressive? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> I don't know	Is your dog dog-aggressive? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> I don't know
If you answered 'yes' to any of the above aggressive behavior questions, please explain.		
Has your dog ever growled or snapped at a person who has taken food or toys away from your dog? If yes, what were the circumstances.		
Has your dog ever bitten another animal or person? If yes, what were the circumstances?		
Animal Behaviors		

<p>Does your dog chew on blankets, cots, or bedding?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Does your dog require medication for anxiety/stress/etc.? If so, what? (Benadryl, etc.)</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Which of the following best describes your dog's level of socialization with other dogs?</p> <p><input type="radio"/> None - No knowledge of other dog interaction <input type="radio"/> Minimal - On leash encounters only.</p> <p><input type="radio"/> Moderate - Some off-leash playtime <input type="radio"/> Extensive - Regular visits to dog social events, parks, dog daycare.</p>	
<p>Has your dog had any previous problems in an off-leash social environment?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>If yes, check all that apply.</p> <p><input type="radio"/> Altercation or fight in a public dog park</p> <p><input type="radio"/> Altercation or fight with a neighbor or friend's dog</p> <p><input type="radio"/> Fearful reaction in a group of dogs</p> <p><input type="radio"/> Dismissed from a prior dog daycare or social playgroup program</p> <p><input type="radio"/> My dog has not had any previous problems.</p>	
<p>Is your dog frightened by thunderstorms, fireworks and/or other loud noises? If yes, describe typical behavior and what specifically helps to relax your dog or calm his/her fear.</p>	
<p>Is your dog frightened or nervous around anything else? If yes, please explain.</p>	
Pet History	
<p>How did you get your dog?</p> <p><input type="radio"/> Adopted/Purchased as a puppy <input type="radio"/> Adopted/Purchased with knowledge of history</p> <p><input type="radio"/> Adopted/Purchased with no knowledge of history.</p>	
<p>Please share any information of your pet's history that you may have.</p>	
Exercise	
<p>Would you like your dog to participate in group play?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>If yes, why would you like your dog to participate in group play? (Check all that apply):</p> <p><input type="radio"/> Enjoys play with other dogs <input type="radio"/> So they are not at home alone <input type="radio"/> Exhibits symptoms of separation anxiety</p> <p><input type="radio"/> Recommended by another pet professional (trainer, vet, etc.) <input type="radio"/> I do not want my dog to participate in group play</p>	