

It's a Dog's Life



860.638.1184 • www.dogslife-daycare.com
19 Meriden Rd, Middlefield, CT 06455

Doggie General Information

Doggie's Name: _____

How long have you owned your dog? _____

Where did you get your dog? _____

Has your dog ever attended Doggie Daycare? Yes _____ No: _____

If yes, what daycare have they attended? _____

Why have you decided to change daycares? _____

Home Life:

How does your dog interact with children? _____

Males? _____ Females? _____

Are there any other animals in your household? Yes _____ No _____

If yes, how does your dog interact with them? _____

Health:

Is your dog on flea/tick protection? Yes _____ No _____ (All dogs must be protected to be able to attend)

Is your dog on heartworm prevention? Yes _____ No _____

List any current or chronic medical problems: _____

List any medications your dog is currently taking: _____

Do these need to be administered during the hours your dog is attending daycare? Yes _____ No _____

Does your dog have any food allergies that we should be aware of? Yes _____ No _____

If yes, please list: _____

What brand food does your dog eat? _____

How often do you feed your dog? _____ How much do you feed your dog? _____

Behavior:

Does your dog have regular interaction with other dogs? Yes_____ No_____

How does your dog interact with strangers coming into your home or yard? _____

Does your dog bark or growl at other people or other dogs? Yes_____ No_____

Does your dog display any fears or dislikes? (Ex. thunder) Yes_____ No_____ If yes, please describe:

Are there certain breeds that your dog does not interact well with? _____

How does your dog interact with puppies? _____

Does your dog have separation anxiety? Yes_____ No_____ How severe? _____

Has your dog ever been destructive in your house? Yes_____ No_____

Does your have any of these types' aggressions?

Leash: Yes_____ No_____ **Cage:** Yes_____ No_____ **Toy:** Yes_____ No_____

Food-: Yes_____ No_____ **Water:** Yes_____ No_____

Does your dog jump on people? Yes_____ No_____

Has your dog even bitten someone? Yes_____ No_____ If yes, please describe situation _____

Has your dog ever been in a fight with another dog? Yes_____ No_____ If yes, please describe situation _____

Has your dog ever been known to escape or jump fences? Yes_____ No_____

Obedience:

Has your dog ever have formal obedience training? Yes_____ No_____

What commands does your dog know? _____

Are these commands? Verbal _____ Hand commands _____

Is your dog crate trained? Yes_____ No_____ Is your dog allowed on furniture? Yes_____ No_____

Is there any other information about your dog that we should know? _____