

Melissa's Dog Walking, LLC

DOG INFORMATION

Please complete for each pet

Client's Name: _____

Dog's Name: _____ Breed: _____

Gender M F Neutered / Spayed YES / NO

Age: _____ Dog Rabies Tag #: _____ Expiration Date: _____

Micro-chipped: YES / NO Chip #: _____ Registry Co/Phone #: _____

FEEDING INSTRUCTIONS: _____

Medication Information: _____

Favorite Games / Toys: _____

Hiding Places: _____

When you walk your dog what does s/he do when s/he sees another dog:

- Ignores the other dog
- Shows some interest but keeps on walking
- Wags tails and wants to play
- Growls and becomes aggressive
- Pulls hard on the leash to try to get to other dog

When you walk your dog what does s/he do when s/he sees a cat:

- Ignores the cat
- Shows some interest but keeps on walking
- Wags tails and wants to play
- Growls and becomes aggressive
- Pulls hard on the leash to try to get to cat

Commands your dog knows (i.e. heel, sit, etc) _____

Does your dog come when called? Y N

Where do you dispose of your dog's waste? _____

Special Instructions:
