

**Additional Guest**

**Dog's Name** \_\_\_\_\_ **Breed** \_\_\_\_\_  
Color \_\_\_\_\_ Sex \_\_\_\_\_ Spayed/Neutered Yes ( ) No ( )  
DOB/Age \_\_\_\_\_ Weight \_\_\_\_\_  
Tattoo or Microchip Number \_\_\_\_\_ Special Markings \_\_\_\_\_

Date you acquired your dog \_\_\_\_\_  
Where did you get your dog? \_\_\_\_\_  
If adopted, do you have any knowledge of your dog's past history? If so, please explain. \_\_\_\_\_

Are there other animals in your household? Yes ( ) No ( )  
If yes, please list type of animal, sex and age of each:

\_\_\_\_\_ How does your  
dog behave around other household animals?  
\_\_\_\_\_  
\_\_\_\_\_

**Health**

Has your dog ever had a problem with fleas? Yes ( ) No ( ) \_\_\_\_\_  
Skin condition? Yes ( ) No ( ) \_\_\_\_\_  
Intestinal parasites? Yes ( ) No ( ) \_\_\_\_\_  
Allergies? Yes ( ) No ( ) \_\_\_\_\_  
Hip dysplasia? Yes ( ) No ( ) If so, what restrictions need to be placed on your dog's activities? \_\_\_\_\_  
Any other medical conditions? \_\_\_\_\_

Brand of Flea Control \_\_\_\_\_ Heartworm prevention \_\_\_\_\_  
Veterinarian \_\_\_\_\_ Clinic Name/Phone \_\_\_\_\_

**Grooming**

Does your dog like to be brushed? Yes ( ) No ( )  
How does your dog behave when having his/her nails trimmed?

\_\_\_\_\_  
Is your dog sensitive with any areas on his/her body?  
\_\_\_\_\_  
\_\_\_\_\_

**Please Tell Us about Your Dog's Daily Routine**

**Feeding**

Brand/type of food \_\_\_\_\_ Amount \_\_\_\_\_ Times per day \_\_\_\_\_

**Elimination**

Number of times per day he/she urinates \_\_\_\_\_ defecates \_\_\_\_\_  
Leash walked or off leash in fenced area \_\_\_\_\_

Has your pet ever had any medical problems with either urinating or defecating?  
Yes ( ) No ( ) If yes please explain \_\_\_\_\_

**Activity**

How or where does your dog spend the day? Is your dog crate trained? Y( ) N( )  
\_\_\_\_\_  
\_\_\_\_\_

**About Paws At Play**

We require that you bring your dog’s own food to avoid an abrupt change in diet which could result in GI upset such as vomiting or diarrhea. Your dog’s feeding instructions will be followed. If you forget your dog’s food, our in-house diet is Eukanuba Low Residue which is a bland diet for sensitive stomachs; however it is better that a dog’s diet is not abruptly changed. Water and food intake is monitored as well as defecation and urination. If we have any concerns about any guest, our Veterinarian is immediately consulted. Our Veterinarian also walks through our facility twice daily to check on all guests.

**Socialization** is an important daily routine at Paws At Play. Socialization helps relieve stress, provides important daily exercise and stimulation and helps to develop social skills that are innate in pack animals. Our facility was designed to be totally interactive so by attending you are agreeing to have your pet(s) socialized.

Please answer the following questions in order to help us in our Temperament Evaluation of your pet. After your pets’ evaluation, they will be assigned a collar that specifies what social level they are currently at. They are required to wear this collar the entire time at our facility. The cost of the collar is covered in your registration fee.

Does your dog enjoy playing with other dogs? \_\_\_\_\_

If you have more than one guest which is Alpha (dominate)? Is either protective of the other? \_\_\_\_\_

What type of toys does your dog enjoy? \_\_\_\_\_

What type of activities does your dog enjoy? \_\_\_\_\_

Is your dog afraid of any specific items or noises? If so, please explain  
\_\_\_\_\_  
\_\_\_\_\_

How does your dog behave toward people coming into or around your home or yard?

\_\_\_\_\_

Are there certain people that your dog fears or dislikes? \_\_\_\_\_

Are there any types of dogs that your dog fears or dislikes? \_\_\_\_\_

**Has your dog ever...** growled/snapped at someone? Yes ( ) No ( )

What were the circumstances? (toy or food involved) \_\_\_\_\_

Bitten someone? Yes ( ) No ( )

What were the circumstances? \_\_\_\_\_

Growled/snapped at another dog? Yes ( ) No ( )

What were the circumstances? \_\_\_\_\_

Bitten another dog? Yes ( ) No ( )

What were the circumstances? \_\_\_\_\_

**Has your dog ever displayed any of the following behaviors?**

Mouthing Yes ( ) No ( ) \_\_\_\_\_

Barking Yes ( ) No ( ) \_\_\_\_\_

Digging Yes ( ) No ( ) \_\_\_\_\_

Jumping Yes ( ) No ( ) \_\_\_\_\_

Other \_\_\_\_\_

Is your dog having housetraining issues? \_\_\_\_\_

Is your dog crate trained? \_\_\_\_\_

Has your dog ever participated in any formal obedience training? If so, when and where? \_\_\_\_\_

\_\_\_\_\_

What commands does your dog know?

\_\_\_\_\_

\_\_\_\_\_

Please add any comments about your dog that might be helpful

---

---

---

---

---

---