



Behavior Modification Training Enrollment Form

Owner Information

Owner's Name

Address

City

Zip

Cell Phone #

Email



Pet Information

Pet Name

Breed

Age

Male/Female

Spayed/Neutered?

Weight

Color



General Questions

EXERCISE:

What type of exercise does your dog get? (If not receiving any exercise at this time, note “none” and the reason.)

How long does the exercise last/how often is it provided? (For example, “a 15-minute walk three times daily,” or “plays with neighbor’s dog for an hour once a week.”) _____

Who is normally responsible for exercising your dog?

If walks are provided, what type of collar and leash is being used? (Collar examples: “regular buckle collar”, “head halter”, “body harness”, “pinch/prong collar”, “choke chain”. Leash examples: “6-foot nylon leash”, “retractable leash”.)

Does your dog ever become reactive toward other dogs or people on walks? Yes No If so, please describe:



TRAINING:

- No training yet Trained him ourselves Puppy Group
 Basic Group Intermediate Group Advanced Group Private
 Sent to trainer If group class, did you complete the course? Yes No

- Training methods used (check all that apply): Food treats Praise
 Verbal corrections Physical corrections

Check the behaviors your dog knows.

Sit _____ Down _____ Stay _____ Come _____ Leave it _____
Walk nicely on leash _____ Wait _____

Check all behaviors that apply to your dog:

- Aggressive (describe below) Fearful (describe below) Anxious
when alone Jumps on people Pulls on leash
 Destructive when alone Mouthing/nipping
 Chews furniture/property Digs in yard Urinates in house
 Urinates when excited Defecates in house
Steals food/objects/trash Darts out doors/gates
Escapes from yard Guards food/toys/chewies/other
Excessive att.-seeking Jumps on furniture Stealing Food
Nipping at heels/feet Play biting Stool consumption
Understands but will not obey Excessive vocalization alone



- Excessive voc. when we're home Lunging (on leash) at __people
__dogs __bicyclists __cars __joggers __skaters __strollers
- Threatening/biting family members Threatening/biting strangers
Threat/growl at other animals

Has your dog ever bitten anyone? Yes No

Any animal? Yes No

If so, please describe in as much detail as possible

Has medical attention been necessary (for humans or animals) because of any aggressive incident? Yes No If yes, please explain:

What is your dog's usual reaction when a person he has not met before enters the home?



When was the last time a person unfamiliar to your dog entered the home?

Is there anything else you feel it would be important for us to know?

What is your expectation for the success of behavior modification?

My dog's behavior problem will be completely cured.

My dog's behavior will improve enough to be safe and manageable.

My skills and understanding of my dog will improve, but my dog's behavior will stay the same.

I am not optimistic that my dog's behavior can be modified, but I am willing to try.

Thanks! We can't wait to meet you!