

Canine GameTime Application



OWNER INFORMATION

Name:	Name:
Employer:	Employer:
Home Phone #:	Home Phone #:
Work Phone #:	Work Phone #:
Cell Phone #:	Cell Phone #:
Home Address:	
City, State & Zip:	
Email 1(home/work):	
Email 2(home/work):	

Please identify best way to reach you during the day with an "*".

EMERGENCY CONTACT INFO

Name:
Phone: Alternate Phone #:
Instructions in Case of Emergency:

DOG INFORMATION

Dog #1	Dog #2
Name:	Name:
Male/Female:	Male/Female:
Breed:	Breed:
Color/Markings:	Color/Markings:
Age:	Age:
Weight:	Weight:
Spayed/Neutered (Y/N):	Spayed/Neutered (Y/N):

VETERINARIAN INFORMATION

Clinic Name:
Vet Name:
Vet Phone #:

How did you hear about Canine GameTime?

NAME: _____

1

DATE: _____

Canine GameTime Application



DOG PROFILES

[Fill out pages 2 & 3 for each dog]

Name:
Birthdate (if known):
PA License #:
MicroChip Info:
How long have you owned your dog?
If adopted, do you have any info about your dog's history?
Are there children in your household; if so, what ages?
Are there other pets in your household; if so, what type & ages?
Specify type of Heartworm preventative used & DATE of last Fecal Exam:
Specify type of Flea/Tick preventative used:
Health Concerns or Limitations:
Is your dog allowed to have dog treats such as Milkbones? Any restrictions?

Personality Assessment

<p>Behavior with Other Dogs:</p> <p>Has your dog had opportunities to socialize with other dogs? If so, in what environment, and how did they behave?</p> <p> Only females –</p> <p> Only males –</p> <p> With males & females –</p> <p>How does your dog behave when on a walk and you encounter another dog?</p> <p> On Leash –</p> <p> Off Leash –</p> <p>Has your dog ever been in dog daycare? If so, how long ago, for how long, and why did you leave?</p> <p>Is your dog willing to share the following with other dogs? Describe any aggressive behaviors</p> <p> Food/Treats</p> <p> Toys</p>

NAME: _____

2

DATE: _____

Canine GameTime Application



Dogs Just Wanna Have Fun!

Has your dog ever snapped at or bitten another animal? Describe the incident.

Behavior with People:

Has your dog been around children? If so, how do they behave around them?

Does your dog have opportunities to interact with adults outside of your household? If so, how do they behave?

How does your dog behave when on a walk when you encounter strangers?

On Leash –

Off Leash –

How does your dog behave when a stranger comes to your home?

Has your dog ever growled, snapped at or bitten any person? If so, describe the incident.

General Behavior:

Is your dog frightened by any noises or thunderstorms? If yes, describe behavior

Has your dog ever jumped/climbed a fence or dug under a fence?

Name the commands your dog responds to (explain if not obvious):

Favorite Activities/Forms of Play (fetch, tug-o-war, Frisbee, etc.):

NAME: _____

3

DATE: _____