



# AUSTIN CANINE CENTRAL

Exclusive Home of Joyce Morgan Dog Training

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## DOG DAY CARE QUESTIONNAIRE

Date: \_\_\_\_\_

Dog's Name \_\_\_\_\_ Dog's Breed \_\_\_\_\_

Dog's Age/DOB \_\_\_\_\_ Dog's Sex \_\_\_\_\_ Spayed or Neutered? \_\_\_\_\_

Owner's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell or Pager \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact (name and phone) \_\_\_\_\_

**Who is authorized to pick up your dog?** \_\_\_\_\_

Vet Name \_\_\_\_\_ Vet Phone \_\_\_\_\_

Date of DHLPP \_\_\_\_\_ Date of Rabies \_\_\_\_\_ Date of Bordatella \_\_\_\_\_

(Must be accompanied by shot record from your vet)

Any known allergies or illness? \_\_\_\_\_

List any and all present medications taken by your dog (including heartworm prevention and flea and tick prevention). \_\_\_\_\_

Do you want to be on our Yahoo Group List? Yes \_\_\_\_\_ No \_\_\_\_\_ Already Am \_\_\_\_\_

How did you hear about us? (Google, Yelp, Vet Name, Etc.) \_\_\_\_\_

**If a friend referred you, may we have their name? We would like to thank them.**

### We ask the following questions to better understand your dog:

How, when, and at what age did you get your dog? \_\_\_\_\_

What do you feed your dog? \_\_\_\_\_

How often do you feed your dog and how much? \_\_\_\_\_

What are your dog's favorite toys? \_\_\_\_\_

Has your dog shown any possessive tendencies regarding food or toys? \_\_\_\_\_

Where does your dog sleep? \_\_\_\_\_

Is your dog allowed on the furniture? \_\_\_\_\_

How much time does your dog spend indoors? \_\_\_\_\_ Outdoors? \_\_\_\_\_

Does your dog jump fences? \_\_\_\_\_ Does your dog dig under fences? \_\_\_\_\_

Is your dog housebroken? \_\_\_\_\_

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

Has your dog ever been bitten or attacked by another dog? \_\_\_\_\_

If so, what type of dog? \_\_\_\_\_

Has your dog ever bitten or attempted to bite another animal? \_\_\_\_\_

Has your dog ever bitten or attempted to bite a person? \_\_\_\_\_

Does your dog have any particular apprehensions or aversions to certain situations, items, people or animals? \_\_\_\_\_

If so, list: \_\_\_\_\_

Have you done any obedience or behavioral work with your dog? \_\_\_\_\_

If so, who was your trainer/where did you train? \_\_\_\_\_

Has your dog ever been to day care before? \_\_\_\_\_

If so, where? \_\_\_\_\_