



Puppy Tubs B & B Pet Resort

232 Stevens Entry, Peachtree City, GA 30269 Web:
www.puppytubsbnb.com
Telephone: 678-364-WOOF (9663) FAX: 678-364-9669

OWNER INFORMATION

Date _____

Name _____

Address _____ City: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Email: _____

Spouse/Partner Name: _____

Home Phone: _____ Work: _____ Cell: _____

Emergency Contact Name: _____ Phone: _____

Others authorized to pick up my dog: _____

PET INFORMATION

Dog's Name: _____

Sex: Male Female

Birthday: _____ Breed: _____

Color: _____ Weight: _____

Veterinarian: _____

Address: _____ Phone: _____

Vaccinations (Date last given):

DHLPP _____

Rabies _____

Bordetella _____

Spayed/Neutered _____ If no, when is it scheduled? _____

HOW DID YOU HEAR ABOUT PUPPY TUBS PET RESORT?

DOG PROFILE

How long have you owned your dog? _____

**Please Note: Puppy Tubs B & B requires that you have owned your dog for at least two months prior to evaluation.*

Where did you get your dog? _____

Do you have knowledge of your dog's past history? Yes No

If yes, please describe

Number of People in your household: Adult males: _____ Adult females: _____

Children / ages: _____

List other animals in your household:

Species	Breed	Age	Altered?	Sex
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

How does your dog get along with other animals in your home?

HEALTH & GROOMING

Does your dog have any medical problems or physical disabilities? Yes No

If yes, what restrictions need to be placed on your dog's activities?

No jumping

No running

No hard play

Other (please describe) _____

Is your dog currently taking flea and tick preventative? Yes No

Is your dog taking any medications? Yes No

Please describe _____

Does your dog have any allergies? Yes No

Please describe _____

Does your dog like to be brushed? Yes Tolerates it No

Is your dog easily handled by you? Yes No **By your vet?** Yes No

How does your dog react when you lead them by the collar?

Does Fine Does OK, but pulls away Doesn't like to be lead by the collar

Does your dog have any areas where he does not like to be touched? Yes No

Please state which areas _____

Where does your dog like to be petted? _____

How does your dog get exercised? _____

How often? _____

Describe your dogs activity level: Couch Potato Moderate Active Very Active

TRAINING

Has your dog had any formal obedience training? Yes No

When and where? _____

What commands does your dog know?

What percent of time does your dog respond to their commands?

At home _____ Outside _____

Is your dog crate trained? Yes No

Does your dog have a problem with (circle all that apply)

Excessive barking Jumping Mouthiness Eating stool

BEHAVIOR

What does your dog do when you are not home? _____

How does your dog show he/she is happy? _____

Describe your dogs' personality

Shy Mellow Outgoing Excitable Active Couch potato

Rambunctious Content to be around others Slow to warm

What is your dogs' favorite...

Toy _____ Treat _____

Activity _____ Place in the house _____

How often does your dog get socialization with other people on a regular basis?

None Minimal Moderate Frequent

Are there any kinds of people your dog automatically fears or dislikes? Yes No

Please describe _____

Have you tried taking food, toys or bones away from your dog? Yes No

What happened? _____

Has anyone else tried taking food, toys or bones away from your dog? Yes No

What happened? _____

Do visitors bring their dog to your home? Yes No

If Yes, how does your dog respond? _____

Has your dog shared food/toys with another dog? Yes No

How often does your dog get socialization with other dogs on a regular basis?

None Minimal Moderate Frequent

Does your dog have off leash play with other dogs? Yes No

Where and how often? _____

Are there any sizes/breeds of dogs your dog automatically fears or dislikes? Yes No

Please describe _____

How does your dog react to other dogs on leash? _____

How does your dog interact with:

Big dogs Does well Doesn't do well Doesn't care

Small dogs Does well Doesn't do well Doesn't care

Older dogs Does well Doesn't do well Doesn't care

Puppies Does well Doesn't do well Doesn't care

What kind of games does your dog play with other dogs?

Wrestle Chase Tug Other: _____

Does your dog prefer to play with: male dogs female dogs no preference

Has your dog ever growled at someone? Yes No

What were the circumstances? _____

Has your dog ever bitten someone? Yes No

What were the circumstances? _____

Has your dog ever climbed or jumped over a fence? Yes No

How high was it? _____

What are your goals for having your dog attend daycare?

Additional comments or information we should know about your dog?