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Enrollment Application

Dog's Name _____ Breed _____ Sex _____ DOB _____ Dog's Age _____
Weight _____ Spayed/Neutered? _____ Tattooed/Microchipped? _____ Microchip # _____
Distinct Markings on Dog _____

Owner's Name _____ E-Mail _____
Phone #'s: Home _____ Work _____ Cell _____ Other _____
Address _____ City _____ State _____ Zip _____

Vet Clinic Name _____ **Preferred Doctor** _____ **Vet Phone** _____
Vet Address _____ Any Known Allergies _____
Is your dog current on all recommended vaccinations? _____ Bordatella vaccination within the last 6 months? _____
Is your dog currently on a flea & tick preventative? _____ Brand Name _____
Known Medical Issues/Special Needs _____
List any medications & schedules for the dog _____

Social History Where did you get this dog? _____ How long have you had him? _____
Note any history of the dog that might be helpful _____
Is the dog housebroken? _____ Toileting Schedule _____
Has your dog ever been crated? Explain _____
Has the dog had any obedience training? _____ Known commands _____
Where does your dog spend the day when you are gone? _____ When you are home? _____
Any other pets in the household? _____ Children in household/Ages? _____
Other adults in household? _____ When you leave the house, how does your dog react? _____
How does your dog behave around unknown dogs? _____
How does your dog behave around unknown people? _____
Note anything that might frighten your dog _____
Has your dog ever bitten a person _____ Bitten another dog _____ Aggressively guarded toys or food _____
Please explain any & all situation(s) _____
On a scale of 1 to 10 (1 being very mellow / 10 being uncontrollably hyper), rate your dog's usual activity level _____

Circle all behaviors listed that describe your dog *barks a lot whines a lot howls chews nips begs unruly bolts off leash doesn't listen wanders off shy/timid jumps on others soils living areas digs in yard paces entertains himself plays with toys fears loud noises anxious when left alone urinates when approached is quiet likes to be brushed likes to swim likes to retrieve tries to jump fences digs under fences plays well with other dogs can open a gate or door likes baths likes puppies*

Feeding Routine Dog eats by... _____ free choice, or _____ scheduled feeding(s) at _____ (times)
Brand of Food _____ Amount/meal _____
_____ Dry _____ Canned _____ Mixture • Snacks given _____ times/day _____
Brand of Snacks _____ Any Known Food Allergies? _____
Apetite is _____ picky _____ not picky _____ will always eat Notes: _____
May your dog be given rawhide chews? _____ Other notes on feeding _____

Exercise Circle all that apply to your dog... _____ allowed to run freely, unsupervised _____ fenced/kennel/run
leash-walked _____ outside in yard all day _____ unleashed, but supervised _____ indoors all the time _____ knows how to use a dog door
How often does your dog get exercised? _____ Where? _____
Do you give SPA permission to photograph your pet? _____ May we use the photos in advertising or marketing? _____
What else should SPA know about your dog? _____
How did you learn about South Paw Acres? _____

I certify that the information I have outlined herein is accurate to the best of my knowledge as of the date signed below.

Pet Owner's Signature _____



Today's date _____

I agree that the typing of the Pet Owner name on this line is considered as legally binding as a hand-written signature.

enroll.app.11.10

Properly Trained. A Man Can Be Dog's Best Friend.

- Corey Ford, American Writer