



5303 West Interurban Blvd., Bothell, WA 98012
Phone: (425) 482-4472 Fax: (425) 482-9410

TRAINING PET PROFILE

Please **PRINT** clearly

How did you hear about us? _____

Dog's Name _____ Date of Birth _____ M F

Breed _____ Spayed/Neutered? Y N

Owner's Name(s) _____

Home Address _____ City _____ Zip _____

Phone (_____) _____ Additional Phone (_____) _____

Email Address(es) _____

EMERGENCY CONTACT (other than self) _____ Phone (_____) _____

Vet or Clinic Name _____ Phone (_____) _____

Where did you get your dog? _____ How long have you had your dog? _____

Is your dog on a flea program? Y N If yes, which flea treatment? _____

Please indicate your dog's... (check all boxes that apply)

Energy Level: High Medium Low Other _____

Activity Level at Home: Couch Potato Mild Exerciser Moderate Exerciser Athlete

Temperament: Laid back Playful Excitable Shy Dominant Aggressive
 Other _____

Socialization Experience: Extensive Moderate Minimal None

When alone, does your dog tend to: Chew Dig Bark Cry/Howl Other _____

Has your dog completed any training? Y N If yes, when/where? _____

Has your dog ever bitten another animal or person? Y N If yes, please describe the incident(s) _____

Has your dog attended a dog daycare, boarding facility, or off-leash park? Y N

If yes, were there any problems with other dogs or people? Y N If yes, please describe _____

How often do you brush/comb your dog? _____ Does your dog enjoy it? Y N

How does your dog react to nail clipping? _____

Describe your dog's diet (dry/soft food, treats, add-ins) _____

Does your dog have ANY allergies (i.e. food, skin, seasonal, etc.)? _____

Please provide any additional information you feel necessary to ensure the well-being of your dog and others _____

I/we certify that all the information above is true and accurate and ALL owners are listed above and have signed below. I/we have read and agree to all the terms and conditions and release of liability set forth by Doggy Haven Resort..

Owner's Signature _____ Date _____

Owner's Signature _____ Date _____