

# Pet Questionnaire

Does your dog bark a lot? YES / NO

Does your dog have any allergies? YES / NO

If yes, what are they? \_\_\_\_\_

Are there any past or current conditions to be aware of? \_\_\_\_\_

Is your dog frightened of any noises? \_\_\_\_\_

Is your dog toy or food aggressive? YES / NO

If yes, which one? \_\_\_\_\_

Are there any sensitive areas on their body? \_\_\_\_\_

Does your dog have an issue with their collar being handled? YES / NO

Are there any types of people that they fear or dislike? \_\_\_\_\_

How does your dog react to other dogs? \_\_\_\_\_

Does your dog show any destructive behaviors when left alone at home? \_\_\_\_\_

Is your dog aggressive on leash? YES / NO    Off Leash? YES / NO

Has your dog ever bit anyone? YES / NO    If yes, what were the circumstances? \_\_\_\_\_

Has your dog jumped or climbed a fence? YES / NO    How high? \_\_\_\_\_

Is there any other information you feel we need to provide a safe and fun experience for your dog? \_\_\_\_\_

Do you authorize for us to post photos/videos of your dog? YES / NO