



# A Place for Paws Daycare & Training Client Profile

Owner's last name \_\_\_\_\_

Dog's name \_\_\_\_\_

Date \_\_\_\_\_

For Instructor Use		
Paid by	Amount	How Many?
1st	2nd	3rd
4th	5th	6th

Owner \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Dog Breed \_\_\_\_\_ Age/Date of Birth: \_\_\_\_\_

Sex:  Male  Female Spayed/Neutered?  Yes  No

Has this dog had any prior training?  Yes  No If yes, when and where? Which classes?

1. What are your goals for your dog?

- A well behaved dog
- Solution to behavior problem
- Learn more about training
- Have a more active canine companion
- Develop a better relationship with pet
- Learn more about dog ownership

2. Would you be interested in doing any of the following activities with your dog?

- Agility
- Tracking
- Therapy Dog
- Herding
- Weight pull
- Competition Obedience
- Flyball
- Rally Obedience
- Hunting
- Mushing/skijoring
- Conformation
- Freestyle Dance
- Schutzhund
- Earthdog
- Other \_\_\_\_\_

3. How did you hear about A Place for Paws? \_\_\_\_\_

4. What attracted you to this breed and/or this dog? \_\_\_\_\_

5. At what age did you bring your dog home? \_\_\_\_\_



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6. Where did you get your dog? \_\_\_\_\_

7. How long is your dog left alone? \_\_\_\_\_

8. Is your dog primary an  indoor dog or an  outdoor dog?

9. Where and how is your dog kept?

Loose in the house  Confined or crated in the house

Outside in a kennel  Loose outside

Tied outside  In a fenced-in yard

Other \_\_\_\_\_

10. Has your dog ever growled or snapped at anyone?  Yes  No

11. Has your dog ever bitten anyone?  Yes  No If yes, please describe the circumstance.

\_\_\_\_\_  
\_\_\_\_\_

12. Has your dog ever been involved in a fight with another dog?  Yes  No

If yes, please describe the circumstance. \_\_\_\_\_

\_\_\_\_\_

13. Does anything upset your dog? \_\_\_\_\_

14. How would you describe your dog's personality?

Shy  Independent  Soft/Sweet  Nervous

Friendly  Calm  Territorial  Bold

Playful  Stubborn  Possessive  Fearful

Active  Pushy  Annoying  Needy

Happy  Reactive  Dependent  Demanding

15. What do you love about your dog? \_\_\_\_\_

\_\_\_\_\_

16. What would you change about your dog? \_\_\_\_\_

\_\_\_\_\_

17. Any additional comments, questions, or concerns? \_\_\_\_\_

\_\_\_\_\_

A Place for Paws

165 Nulf Dr. Columbiana, Ohio 44408 (330) 482-4596

www.aplaceforpaws.com



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