



Dog Enrollment Application

How did you hear about Woof & Whiskers Resort?

Owner Information

Name: _____

Address: _____

EMAIL: _____

Phone: _____

Emergency Contact

Name: _____

Phone: _____

Pet Information

Name: _____ Breed: _____ Sex: _____

Neutered: _____ Birthdate or Age: _____ Weight: _____

Veterinarian: _____ Phone: _____

Pet Personality Profile

Raised from a puppy? _____ Adopted? _____ If so, how long have you had your dog? _____

If adopted, do you have any knowledge of your dog's past history? _____

General

Has your pet boarded before? _____ Does your pet walk well on a leash? _____

Will your pet destroy bedding or toys? _____ Has your dog ever climbed a fence? _____

Feeding

Brand Name(s) of Food: _____

Feedings per day _____ Amount (cups) per feeding _____

Additional feeding instructions _____

May we add white rice, chicken or beef broth if your pet is not eating or has stomach upset? _____

Medical/Health

Conditions: _____

Allergies or Food Sensitivities: _____

Medication and Dispensing Instructions: _____

We sometimes use peanut butter, yogurt or pill pockets to entice our pets to take medication.

Is this acceptable? _____ If not, please advise how you administer medication _____

Are there any restrictions that need to be placed on activities or movements?

Behavior

Please check any personality traits that describe your dog:

___ Playful ___ Shy ___ Affectionate ___ Outgoing ___ Submissive ___ Insecure ___ Gentle ___ Quiet

___ Mouthy ___ Jumpy ___ Avid Barker ___ Digger ___ Toy Aggressive ___ House training Needed

Please describe your dog's activity Level: ___ Low ___ Medium ___ High

Is our dog crate trained? _____ If yes, does your dog like being in his/her crate? _____

Does your dog act afraid of any specific items or noises? If so, please explain: _____

Are there any kinds of dogs or people your dog automatically fears or dislikes? _____

Has your dog ever bitten or growled at someone or another dog? _____ What were the circumstances? _____

Has your dog ever been bitten by another dog? _____

If yes to any, please explain:

Please indicate where your dog may become unfriendly or react in a negative manner:

Grabbing Collar ___ Being removed from furniture ___ Touching ears ___ Touching Tail ___ Being Pet

Removing toy from mouth ___ Hugging ___ Being touched while sleeping ___ Touching paws

Other – please explain:

Has your dog ever snapped/growled at anyone or another dog who has taken his/her food or toys away or guarded and been possessive of food, toys, people, etc ?

If yes, what were the circumstances?

Does your dog play with other dogs? ___ In what type of setting? (Back yard with neighborhood dog/dog park, etc.)

Has your dog ever had formal obedience training? ___ When/Where

My pet likes: ___ Playing catch ___ Chasing a laser beam ___ Rope toys ___ Being Brushed ___ Cuddling

What commands/tricks does your dog know?

Other comments about your dog which you feel might be helpful

Note: Please visit our Facebook Page and also join our private group *Woof & Whiskers Resort Parents and Friends* where we post pictures daily of our guests during their stays.