



## Information form

Please read this form and the accompanying Terms and Conditions carefully (this level of detail is required to ensure we can provide the highest level of care and safety for your dog). Then complete and sign this form (including acceptance of the Terms and Conditions, Off the Lead Consent Form and Waiver of Liability).

### General Information

Your name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Work: \_\_\_\_\_

### Partners details

Name: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Work: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

### Vet details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

## **Security information**

Please provide details of any access codes and alarm instructions (if alarm will be enabled during the period of our services)

## **Dogs details**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Breed: \_\_\_\_\_

Colour: \_\_\_\_\_

(Please circle)

Insured: Yes No

Microchipped: Yes No

Length of ownership: \_\_\_\_\_

**Briefly describe your dogs history e.g.: adopted**

Date of last immunisation: \_\_\_\_\_

Is your dog neutered? (Please circle)

Yes No No but will be by (date) \_\_\_\_\_

Un-neutered bitch? Date of last season \_\_\_\_\_

Is your dog up to date with immunisation? (Please circle)

Yes No No but will be by (date) \_\_\_\_\_

If yes what was the date of last injection? \_\_\_\_\_

Please list any allergies we should be aware of?

Please list any pre-existing or current health conditions we should be aware of?

Please list any medication your dog is currently taking and instructions

Please let us know if your dog has any sensitive areas on their body

Please describe any restrictions on activity (e.g. Physical limitations due health problems)

If you have specific 'pet' names that you would like us to use then please list here

Is your dog allowed treats while in our care? (Please circle)      Yes      No

If you would prefer a specific brand please provide them as we make our own liver cake for treats

## **Social skills**

Please provide details of any formal obedience training received

How does your dog react to other people and dogs while out walking?

## **Behaviour**

Please describe general behaviour and energy levels (Both inside and when out)

Please provide details if your dog is anxious around or frightened by any of the following

Loud noises \_\_\_\_\_

Particular actions \_\_\_\_\_

Certain objects \_\_\_\_\_

Certain breeds or types of dogs \_\_\_\_\_

Certain people \_\_\_\_\_

Anything else \_\_\_\_\_

\_\_\_\_\_

Where does your dog like to sit in the car and do they suffer car sickness?

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Does your dog play off lead with other dogs?

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Does your dog live with children?

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Does your dog behave around new children?

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How does your dog behave around livestock?

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Has your dog ever bitten anyone? (Please describe the circumstances)

Has your dog ever growled/snarled at anyone? (Please describe the circumstances)

Has your dog ever bitten another dog apart from play biting? (Please describe the circumstances)

Does he/she allow you to take things out of their mouth?

What types of dogs does your dog like to socialise with (e.g. small, female, playful, calm)

**Will Chase:**

- Doesn't Chase
- Cats
- Deer
- Livestock
- Small Animals

**Off Lead with Owner:**

- Yes - Always
- Usually
- Occasionally
- Never

**Recall:**

- Very Good
- Average
- Poor

Notes and what command is used

Please provide any other information you think would be useful to enable us to give your dog the best possible care and have the most fun, while in the care of Doggy Trails Pet Services.

**Disclaimer & Waiver of Liability:**

The information I have given in this application is true, correct and complete to the best of my knowledge.

I have read and agree to abide by the Terms and Conditions for services received from Doggy Trails Pet Services. I hereby indemnify Doggy Trails Pet Services and their staff against liability of any kind whatsoever arising from my dog's participation in any services offered by Doggy Trails Pet Services.

Please tick to accept our terms and conditions

**Off the Lead Consent Form:**

I agree to Doggy Trails Pet Services having the right to allow my dog off the lead and understand that all terms and conditions remain the same.

I have read and agree to abide by the Terms and Conditions for services received from Doggy Trails Pet Services. I hereby indemnify Doggy Trails Pet Services and their staff against liability of any kind whatsoever arising from my dog's participation in any services offered by Doggy Trails Pet Services.

Please tick to accept our terms and conditions

**Key Holder Disclaimer & Waiver of Liability:**

The information I have given in this application is true, correct and complete to the best of my knowledge.

I have read and agree to abide by the Terms and Conditions for services received from Doggy Trails Pet Services. I understand that this form acts as permission to hold keys to my property, which I have provided willingly. I hereby indemnify Doggy Trails Pet Services and their staff against liability of any kind whatsoever arising from damage or loss of any property.

Please tick to accept our terms and conditions

Terms of Business can be viewed [here](#).