



C A N I N E S U P P L Y & R E S O R T

Daycare Questionnaire

OWNER INFORMATION

NAME OF OWNER: _____

PET INFORMATION

NAME: _____ BREED: _____

To help us get to know your dog better, please complete the following questions. This information assists us in introducing your pet to our daycare program.

Is there anything your dog does not tolerate well; being lifted, nails clipped, ears cleaned, rough play, taking his bone or treat away, or other?

Does your dog have any physical limitations or health issues? (please be specific)

Is your dog crate trained? (circle one) Yes / No

Are there other pets in your household? (circle one) Yes / No

(please list) _____

Has your dog ever been to a daycare facility before? (circle one) Yes / No

How was the experience for your dog and you?

When was the last time your dog has played in a group setting with 4 or more dogs?

What commands does your dog consistently know?



C A N I N E S U P P L Y & R E S O R T

Has your dog ever bit another dog? (circle one) Yes / No

How severe; no wound, small wound, punctures, stitches, surgery?

What was the situation in general?

Has your dog ever been bit by another dog? (circle one) Yes / No

How severe; no wound, small wound, punctures, stitches, surgery?

What was the situation in general?

Is there any specific dog(s) or breed(s) that your dog tends to dislike?

Is your dog on any medications? (circle one) Yes / No

If Yes, please describe: _____

Is your dog on flea and tick preventative? (circle one) Yes / No

If Yes, please state which one: _____

How does your dog act around other dogs? Please check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Extremely playful | <input type="checkbox"/> Shy around other dogs |
| <input type="checkbox"/> Somewhat playful | <input type="checkbox"/> Would prefer to be with quiet dogs |
| <input type="checkbox"/> Plays roughly | <input type="checkbox"/> Sometimes runs to hide from other dogs |
| <input type="checkbox"/> Mounts while playing | <input type="checkbox"/> Likes big dogs |
| <input type="checkbox"/> Barks at new dogs or while playing | <input type="checkbox"/> Likes small dogs |
| <input type="checkbox"/> Unsure at first but warms up quickly | |
| <input type="checkbox"/> Sometimes prefers to be by themselves | |

Is there any additional information you would like to tell us about your dog(s)?
