

# New Client Information



Welcome to The Dog Complex! We are totally different than any other doggie day care and dog training facility. We provide an entirely structured day full of games, training, and socialization.

Please read each question carefully and answer them to the best of your knowledge. The more we know about your dog the more we can customize your playschool and training experience!

## CLIENT INFORMATION

NAME	
HOME ADDRESS	
PHONE	
ALT. PHONE	
EMAIL	

## EMERGENCY CONTACT

NAME	
PHONE	

## DOG INFORMATION

NAME		BREED	
AGE		YEARS OWNED	

HAS YOUR PET BEEN SPAYED OR NEUTERED?
IF YES, AT WHAT AGE?

## VETERINARIAN INFORMATION

NAME & CLINIC	
PHONE	

## MEDICAL & BEHAVIORAL INFORMATION

DOES YOUR DOG HAVE ANY MEDICAL CONCERNS WE NEED TO KNOW ABOUT?

DOES MEDICATION NEED TO BE ADMINISTERED?

IF YES, WHAT KIND AND HOW OFTEN?

WILL YOUR DOG NEED TO BE FED WHILE IN PLAYSCHOOL?<sup>1</sup>

IF YES, HOW MUCH AND WHEN?

DOES YOUR DOG HAVE ANY ALLERGIES OR SENSITIVITIES TO ANY KIND OF FOOD OR TREAT?

DO YOU ROUTINELY DEWORM YOUR DOG?

DO YOU ADMINISTER FLEA AND TICK PREVENTATIVE? IF YES, WHEN?

IS YOUR DOG UP TO DATE ON PARVO, DISTEMPER, CANINE INFLUENZA, PARAINFLUENZA, BORDETELLA, AND RABIES?

CAN YOUR DOG HAVE TREATS OR CHEWS WHILE IN CARE OF THE DOG COMPLEX?

CAN YOUR BE PLACED IN QUIET TIME/CRATED TO RELAX, RESET OR DECOMPRESS WHILE IN THE CARE OF THE DOG COMPLEX?

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<sup>1</sup> We do not recommend that your dog eats while in playschool aside from a small amount of kibble and treats. Eating large meals while exercising intensely increases your dog's risk of bloat. Any meals give must be provided by the owner of the dog.

WHEN ENCOUNTERING NEW **DOGS ON** A LEASH MY DOG IS MOST LIKELY TO:  
(CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	CAUTIOUSLY APPROACH	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
PULL	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	JUMPS	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:			<input type="checkbox"/>	HAS NOT MET OTHER DOGS	<input type="checkbox"/>

WHEN ENCOUNTERING NEW **DOGS OFF** LEASH MY DOG IS MOST LIKELY TO:  
(CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	CAUTIOUSLY APPROACH	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
SMELL	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	JUMPS	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:			<input type="checkbox"/>	HAS NOT MET OTHER DOGS	<input type="checkbox"/>

WHEN ENCOUNTERING NEW **PEOPLE ON** A LEASH MY DOG IS MOST LIKELY TO:  
(CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	CAUTIOUSLY APPROACH	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
PULL	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	JUMPS	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:			<input type="checkbox"/>	HAS NOT MET NEW PEOPLE	<input type="checkbox"/>

WHEN ENCOUNTERING NEW **PEOPLE OFF** LEASH MY DOG IS MOST LIKELY TO:  
(CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	CAUTIOUSLY APPROACH	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
SMELL	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	JUMPS	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:				HAS NOT MET NEW PEOPLE	<input type="checkbox"/>

WHEN ENCOUNTERING NEW **PEOPLE WHO ENTER MY HOME** MY DOG IS MOST LIKELY TO:  
(CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	CAUTIOUSLY APPROACH	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
SMELL	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	JUMPS	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:				HAS NOT MET PEOPLE AT HOME	<input type="checkbox"/>

WHEN I TRY TO **TAKE AWAY** A TOY, BONE, CHEW, FOOD, WATER OR ANOTHER RESOURCE FROM MY DOG, MY DOG IS MOST LIKELY TO: (CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	STAND OR HOVER OVER OBJECT	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
JUMPS	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	ARCHES BACK	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:				NEVER TAKEN SOMETHING FROM DOG	<input type="checkbox"/>

WHEN **OTHER DOGS APPROACH** MY DOG WHEN THEY HAVE A RESOURCE (CHEWS, BALLS, FOOD, ETC.) MY DOG IS MOST LIKELY TO: (CHECK ALL THAT APPLY)

BARK	<input type="checkbox"/>	RUSH UP	<input type="checkbox"/>	STIFFEN UP OR FREEZE	<input type="checkbox"/>
WHINE	<input type="checkbox"/>	BARE TEETH	<input type="checkbox"/>	RAISE HACKLES	<input type="checkbox"/>
GROWL	<input type="checkbox"/>	LOOK AWAY	<input type="checkbox"/>	STAND OR HOVER OVER OBJECT	<input type="checkbox"/>
HIDE	<input type="checkbox"/>	GET EXCITED	<input type="checkbox"/>	APPEAR FEARFUL	<input type="checkbox"/>
JUMPS	<input type="checkbox"/>	BITE OR SNAP	<input type="checkbox"/>	APPEAR SHY	<input type="checkbox"/>
LUNGE	<input type="checkbox"/>	ARCHES BACK	<input type="checkbox"/>	STARE INTENTLY	<input type="checkbox"/>
OTHER:				NEVER BEEN APPROACHED BY A DOG	<input type="checkbox"/>

MY DOG KNOWS THE FOLLOWING CUES OR IS FAMILIAR WITH: (CHECK ALL THAT APPLY)

SIT	<input type="checkbox"/>	LEAVE IT	<input type="checkbox"/>	PLACE	<input type="checkbox"/>	CLICKER OR MARKER	<input type="checkbox"/>
DOWN	<input type="checkbox"/>	DROP IT	<input type="checkbox"/>	TARGET	<input type="checkbox"/>	HERDING CUES	<input type="checkbox"/>
STAND	<input type="checkbox"/>	TAKE IT	<input type="checkbox"/>	TOUCH	<input type="checkbox"/>	TAKING TREATS GENTLY	<input type="checkbox"/>
HEEL	<input type="checkbox"/>	BACK UP	<input type="checkbox"/>	RETRIEVE	<input type="checkbox"/>	SITTING FOR PETTING	<input type="checkbox"/>
STAY	<input type="checkbox"/>	WALK (ON LEASH)	<input type="checkbox"/>	SHAKE	<input type="checkbox"/>	AGILITY EQUIPMENT	<input type="checkbox"/>
WAIT	<input type="checkbox"/>	WALK (OFF LEASH)	<input type="checkbox"/>	ROLL OVER	<input type="checkbox"/>	CRATE TRAINED	<input type="checkbox"/>
OTHER						DOESN'T KNOW CUES	<input type="checkbox"/>

WHAT ARE YOUR PERSONAL HOBBIES?

(WE ASK THIS TO HELP US BASE YOUR DOGS PLAYSCHOOL/TRAINING CURRICULUM ON. FOR EXAMPLE, A FITNESS PLAN SO A RUNNER COULD BRING HIS OR HER DOG ALONG, OR A DOG WHO RETRIEVE A SPOOL OF YARN FOR SOMEONE WHO KNITS. WE FIRMLY BELIEVE DOGS ARE HAPPIER AND HEALTHIER WHEN WE INCLUDE THEM IN OUR DAILY LIVES WHENEVER POSSIBLE)

I WOULD LOVE IT IF MY DOG LEARNED THE FOLLOWING:  
(CHECK ALL THAT APPLY)

SIT	<input type="checkbox"/>	LEAVE IT	<input type="checkbox"/>	OFF LEASH	<input type="checkbox"/>	CLICKER OR MARKER	<input type="checkbox"/>
DOWN	<input type="checkbox"/>	DROP IT	<input type="checkbox"/>	TARGET	<input type="checkbox"/>	HERDING CUES	<input type="checkbox"/>
STAND	<input type="checkbox"/>	TAKE IT	<input type="checkbox"/>	ROLL OVER	<input type="checkbox"/>	TAKING TREATS GENTLY	<input type="checkbox"/>
HEEL	<input type="checkbox"/>	BACK UP	<input type="checkbox"/>	RETRIEVE	<input type="checkbox"/>	SITTING FOR PETTING	<input type="checkbox"/>
STAY	<input type="checkbox"/>	WALK (ON LEASH)	<input type="checkbox"/>	PICK UP OBJECTS	<input type="checkbox"/>	AGILITY EQUIPMENT	<input type="checkbox"/>
WAIT	<input type="checkbox"/>	WALK (OFF LEASH)	<input type="checkbox"/>	WIPE PAWS	<input type="checkbox"/>	CRATE TRAINED	<input type="checkbox"/>
FREEZE	<input type="checkbox"/>	NOT JUMP	<input type="checkbox"/>	BARN HUNT	<input type="checkbox"/>	STOP BARKING	<input type="checkbox"/>
GAMES	<input type="checkbox"/>	STOP BEGGING	<input type="checkbox"/>	STOP STEALING FOOD	<input type="checkbox"/>	SIT WITH DISTRACTIONS	<input type="checkbox"/>
PLACE	<input type="checkbox"/>	SERVICE DOG	<input type="checkbox"/>	THERAPY DOG	<input type="checkbox"/>	DOWN WITH DISTRACTIONS	<input type="checkbox"/>
SHAKE	<input type="checkbox"/>	HIT LIGHTS	<input type="checkbox"/>	OPEN/CLOSE DOORS	<input type="checkbox"/>	STOP COUNTER SURFING	<input type="checkbox"/>
TOUCH	<input type="checkbox"/>	FOCUS EXERCISES	<input type="checkbox"/>	DOG SOCIALIZATION	<input type="checkbox"/>	PEOPLE SOCIALIZATION	<input type="checkbox"/>

OTHER:

**ADDITIONAL INFORMATION**

THE MOST COMMON CORRECTIVE WORD I USE WITH MY DOG IS:  
(NO, NUH UH, WRONG, BAD, CLAPPING, ETC.)

MY FAVORITE THING ABOUT MY DOG IS:

MY DOG'S FAVORITE THINGS ARE:  
(TYPES OF TREATS, PRAISE, PLAY, WHERE TO BE PET, TYPES OF TOYS, ETC)

MY DOG DOESN'T LIKE:

THINGS I WOULD LIKE TO FIX OR IMPROVE ON WITH MY DOG:

## The Dog Complex Liability Waiver

By signing this document I (state full name), \_\_\_\_\_ attest that all dogs in my ownership are up to date on vaccinations. The Dog Complex requires up to date Parvo, Distemper, Bordetella, Canine Influenza and Parainfluenza. Rabies is required if your dog is over 6 months of age. We highly recommend but do not require a Leptospirosis vaccine. I understand that any dog receiving any service at The Dog Complex must be current on all required vaccines listed above. By signing this document I am stating that my dog(s) are current and that I will not allow vaccines to lapse and continue to keep my dog up to date, boosting vaccines at or before the due date.

I agree to follow my veterinarian's advice on flea, tick and mite preventative, as well as following my veterinarian's recommended deworming treatment. I agree to not hold The Dog Complex, the employees, the leaseholder, The owners or other dog handlers or dog owners liable for any injury or illness. By signing this waiver I understand that active play, training and contact with other dogs can sometimes but rarely result in scrapes, bites, sprains and illness such as a common canine cold. I acknowledge that following my veterinarian's advice on said treatment above lowers this risk considerably.

I will always bring my dog to The Dog Complex in good health and if there has been a change in behavior, eating pattern, stool or any other health concerns that I will notify The Dog Complex right away.

By signing this waiver I have carefully read the new client paperwork, filled out the questionnaire and disclosed any and all behavior and health history to the best of my knowledge. I release The Dog Complex from liability any damages to any dog, person or property my dog inflicts while in the building or the area around The Dog Complex property. By signing this document I waive my right to any legal action against The Dog Complex, its employees as well as legal action against another dog in our care or client of The Dog Complex.

DATE	
NAME	
SIGNATURE	