New Member Application

Thank you for your interest in Fetch Club KC! This questionnaire helps us learn about your dog before the meet and greet.

Owner Information

Owner(s) Name _____

Address _____

City/State/ZIP _____

Phone _____**Alternate/Work #:**_____

Email _____

Preferred contact method _____

Emergency Contact(s)-name/phone number

_____

Dog Information

Dog's Name _____ **Any nicknames** _____

Breed/Mix _____

Sex Male / Female **Age** _____ **Weight** _____ **Spayed/Neutered** _____

Birthday (if known) _____ **How long have you owned your dog?** _____

Please include date of most recent vaccinations

(Proof of *required vaccinations will need to be provided before enrollment)

***Rabies:** _____ ***DA2PP/DHPP:** _____

***Bordatella:** _____ **Leptospirosis:** _____

K9 Influenza: _____ Other: _____

Medical conditions _____

Any medications _____

Allergies _____

Has your dog ever had a contagious illness? If yes, please explain.

Has the vet recommended your dog gain or lose weight? If so, please explain.

Veterinarian Info

Veterinarian _____

Phone Number _____

Address _____

Your Dog's Personality

Circle any that apply:

Friendly – Affectionate - Confident, - Curious - Calm - High Energy – Independent

Playful – Shy – Nervous – Food Motivated - Toy Motivated – Retrieval/Ball Driven

Vocal

Other: _____

What are your dog's favorite activities?

_____

What motivates your dog most?

_____

Can your dog have treats? If so, any preferences?

Socialization & Behavior

How does your dog do with new people/how quickly do they adapt?

_____

How does your dog do with riding in a vehicle?

_____

How does your dog do with other dogs?

_____

Has your dog ever attacked or bitten a person? If yes, please explain.

_____

Has your dog ever attacked or bitten another dog? If yes, please explain.

_____

Has another dog ever attacked your dog or have they had any known trauma? If yes, please explain.

_____

Is your dog resource guarded with food or toys?

_____

Has your dog been asked to leave another daycare? If yes, please explain.

_____

Goals

Is there anything specific you hope your dog gains from our program? (ie. Socialization, adventures, weight loss, learn how to run on a slat mill, etc.)

_____

Anything else you'd like us to know?

_____

How did you hear about us? _____

Owner Signature

Signature: _____ Date: _____