



Pet Assessment & Checklist

Assessor's name: _____ Date: _____

Client Information

How did you hear about Fit 'N' Furry? _____

Name: _____

Address: _____

City: _____ Zip: _____ State: _____

E-mail: _____

Home Phone: _____ Cell Phone: _____ Work: _____

Emergency person to contact in case we cannot reach you:

Name: _____ Phone: _____

We will only be responsible for transporting your pet to your veterinarian if available and if not we will take him/her to the Animal Care Center emergency hospital in Rohnert Park.

Pet Information

Dog's Name: _____ Breed: _____ Male / Female Neutered / Spayed

Birthday / Age: _____ Color: _____ Weight: _____

At feeding times, your dog eats: Fast / Slow / Medium

Is your dog allergic to any food? Yes / No

If yes, please describe the allergy and the reaction: _____

Any other allergies? Explain _____

Veterinarian & Medical Information

Veterinarian Clinic or Hospital: _____

- **Please note: Our 'House Rules' state all pets must have proof of vaccinations before reservations will be confirmed.**

Does your dog have any old or current injuries or health concerns which may limit activities or movements? Yes / No

If yes, please explain: _____

Also, if yes, what restrictions need to be placed on your dog's activities or movements? ___ No jumping, ___ No running, ___ No hard play, ___ No contact with other dogs, ___ Other (please explain) _____

Is your dog taking any medication now? Yes / No

If yes, please name the medication(s), reason(s), and schedule:

Which flea preventative do you use? _____ When was it last given? _____

Is your dog on heartworm prevention? Yes / No

If yes, which one: _____

*******DO NOT FILL OUT BEYOND THIS POINT*******

Pet Assessment & Behavior

How long have you had your dog? _____

Does your dog engage in any unusual or repetitive behaviors? Yes / No

If yes, please explain: _____

Circle all answers that best describe your dog's personality: Pushy / Gentle / Outgoing or timid / Friendly to dogs / Friendly to people / Submissive / Dominant / Playful

Describe your dog's activity level: Low / Medium / High

What type of playmate is your dog? Rough / Gentle / Ball crazy / Solo player

Is your dog socialized? Yes / No

If yes, how does he/she get along with other dogs? _____

How does your dog react to: Puppies _____ Small dogs _____ Large dogs _____

Has your dog stayed overnight in a lodging facility before? Yes / No

If yes, describe your dog's experience: _____

Has your dog ever climbed a fence? Yes / No

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

Has your dog ever growled or snapped at anyone who has tried to take food or toys away? Yes / No

Circle all situations where your dog may become uneasy: Grabbing collar / Hugging / Removing from furniture / Touching while sleeping / Touching ears/paws/mouth/tail / Around other dogs / Other / None

What does your dog do when he reacts or goes on alert mode? (Circle all that apply): Will bite / May bite / Barks only / Growls / Snaps / Shows Teeth / Freezes / Trembles / Moves away / Lunges forward

Has your dog ever bitten anyone? Yes / No Did the bite puncture the skin? Yes / No

If puncture did occur, were stitches required? Yes / No

What happened? _____

Has your dog ever bitten another dog? Yes / No Was veterinary care needed? Yes / No

Is your dog frightened by loud noises? Yes / No If yes, please explain _____

Which commands does your dog know? ___ Sit, ___ Stay, ___ Down, ___ Come, ___ Heel, ___ Rollover, ___ Kisses, ___ High Five, Other _____

Is your dog house trained? Yes / No

Is your dog crate trained? Yes / No

Does your dog have any bathroom-related issues or concerns? _____

Do you currently have any issues with your dog chewing inappropriate items or being destructive? Yes / No If yes, please explain. _____

Is there any other information that you think would be helpful? _____

This box for Fit 'N' Furry's use only:

Doggie Daycare trial was successful: Great 10, 9, 8, 7, 6, 5, 4, 3, 2, 1 Poor / Fair

Recommend for Doggie Daycare: Y / N

Recommend for lodging with normal handling: Y / N

Recommend for lodging ONLY with specialized handling: Y / N

Assessor's Signature: _____