



Dog's Name:

Client's Name and address:

Client's Email:

Client's Phone:

Dog's Breed:

Dog's Age:

Dog's Sex and if intact:

(Circle one)  Male or Female

Spayed or Neuter Date:

How long have you owned dog? What socializing has the dog had?

What training have you done with your dog directly or with another trainer?

What other household members (persons or animals) live with the dog?

Health: Are your dog's vaccines current? Yes or No (Circle one)

Date of Last Rabies Vaccine:  Date of Distemper/Parvo:

Medicines/Illness: