



Rruff House Pre-Training Questionnaire

Owner info:

Name:

Address:

Email:

Phone #:

We do require all pets entering Rruff House to have Bordetella/Distemper/Rabies vaccines.

Pet info:

Name:

Age:

Breed/Description:

Weight:

Sex:

Spayed/neutered:

How/When did you acquire this pet:

Food Allergies/Special Requirements/Health Issues:

Vet Office:

Training info:

Training program interest:

1. Doggy Bootcamp (Board-and-Train)
2. Canine Good Citizen Test Training
3. General Obedience Program
4. Customized Training program
5. Reactive/Fearful/Aggressive Training Program
6. Private Training
7. Other:

Please answer these questions to the best of your ability-

How does your dog react to strangers?:

How does your dog react to other dogs?:

Does your dog have any bite history or history of any aggressive behavior, if so please describe?:

Does your dog have any issues being groomed/bathed/nails clipped?:

Where does your dog sleep at night?:

Are they house/potty trained?:

Where does your dog spend most of their time?:

Are there other pets in the home (if yes list them)?:

Are there children in the home (if yes list their ages)?:

What activities/exercises do you provide for your dog and how often?:

Commands your dog currently knows:

Commands your dog is still learning:

Commands you would like your dog to know:

Current training concerns or behaviors you're concerned about:

Current or previous training completed:

What you want your dog to gain from training with us:

Specific training methods requested:

Specific training methods opposed to (i.e. Prong collars, and e-collars):

What are the goals you have for your dog with training?

How did you hear about us?

Any other notes you think would be beneficial for the trainers at Rruff House to know please write down below: