

Ventura Pet Wellness & Dog Training Center



New Client Information form – Phone Consultation

1. Please fill this form out for a [PHONE CONSULTATION](#) with Shannon Riley-Coyner and return 3 business days prior to your scheduled appointment to shannonvpw@gmail.com
2. Please send us video of your dog's behavior to shannonvpw@gmail.com prior to your appointment. If the video file is too large to share we will send you a drop box link to upload the video to.
3. We encourage you to check out [“The Evolution of Dog Training” by Shannon Riley-Coyner](#) available as eBook, Print book or Audiobook on AMAZON!

Owners Information:

Name: _____ Today's Date: _____

Second Owner Cell/ Alternative Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell: _____ Fax: _____

E- Mail: _____

Who can we thank for your referral? _____

Dogs Information:

Name: _____ Breed: _____

Age: _____ Weight: _____ Sex: _____ Color: _____

Veterinarian: _____ Phone: _____

Spayed/ Neutered: _____ If yes, at what age? _____

Reason: _____

Any behavioral changes following spay/neuter? _____

Where did you get your dog? _____

At what age? _____

List People living in the house with the dog, including children's ages: _____

List other animals in the household, their species, breed, age, and sex and whether or not they are neutered. (Please indicate which of these animals were living in the house when the dog was acquired):

Describe relationships between the animals in the household: _____

Describe interactions / relationships between the dog and family members: _____

How does the dog react to strangers – both in the home and outside of the home? _____

Behavior of the dog in the veterinary office and during examinations: _____

Does the dog live primarily inside or outside? (Describe any restrictions to dog's movements inside the house/ kennel, such as tethers, crate, baby gates, etc.): _____

What are the short term-term goals for your dog (within the next year)? _____

What are your long-term goals for your dog (Therapy dog, agility, family dog, take dog to work, etc.)?

Medical History:

Who is your pet's primary Veterinarian: _____

Date of last physical examination (Please include copies of any relevant medical records and/or blood AND dates of vaccinations): _____

Any known medical problems? _____

Any current medications (Please include dose if known): _____

Behavior

Are you interested in basic obedience or does your dog have any behavior issues you would like to address: _____

If you have had a behavioral incident please fill out the box below, if not you may skip to the next page.

What is your dog's behavior issue and at what age was the behavior first noticed? _____

Duration of incident: _____

Frequency of occurrence: _____

Have there been any changes in the pattern, frequency, intensity and /or length of incidents from the time of onset to the present? _____

Can the dog be interrupted when engaged in the behavior? _____

How long is the interval between the behavior stopping and the beginning of the next occurrence?

Describe any methods attempted to stop the behavior and the dog's response to these methods?

Please give a detailed description of the last time this problem occurred: _____

Behavior History

Dog's Daily Activities:

Please describe a typical 24-hr period in your dog's life. Start with where the dog sleeps and when the dog wakes up in the morning, including any nocturnal activities (such as having to go to the bathroom):

Diet:

Type of food: _____

Frequency of feeding, and the amount fed: _____

Other food/treats/table scraps: _____

Exercise:

On leash, including location, for how long and how many times a day: _____

Off leash, including location, for how long and how many times a day: _____

Time spent playing actively with owner. Please include location and how many times a day. Describe activities that take place: _____

Time spent playing actively with other animals. Please include location and how many times a day: _____

Obedience Training:

Did you take your dog to a puppy class (under 6 months)? Where and when? _____

Have you attended obedience classes with your dog? Where and what kinds of training methods were used, including equipment (choke chain, pinch collar, clicker, etc.): _____

Does your dog do the following willingly (check where appropriate):

- | | | | | |
|--------------------------------|---|------------------------------------|-------------------------------|---|
| ☐ Sit | ☐ Stay | ☐ down | ☐ Come | ☐ Stand for grooming |
| ☐ Fetch | ☐ Walk nice on a leash | ☐ Do tricks | | |

Situations in which your dog is less likely to listen to you: _____

What kind of equipment do you use with your dog (check where appropriate):

- | | | |
|--|---|---------------------------------------|
| ☐ Regular buckle collar | ☐ Limited slip collar | ☐ Choke chain |
| ☐ Pinch collar | ☐ Gentle leader/halite | ☐ Body Harness |

Does your dog work well for (check where appropriate):

- | | | | | |
|-------------------------------|--|------------------------------------|---------------------------------|----------------------------------|
| ☐ Food | ☐ Ball/Frisbee/Retrieve gam | ☐ No reward | ☐ Praise | ☐ Petting |
|-------------------------------|--|------------------------------------|---------------------------------|----------------------------------|

Interactive Behavior

Does your dog demand to be pet or receive attention? _____

Does your dog ever seem irritated by or resent petting or touching? If so, where on their body?

Does your dog bark excessively? If so, when and where? _____

Does your dog cower or run away if people talk loudly or act boisterously? _____

Does your dog ever urinate or roll over on his/her back when greeting (check where appropriate):

- | | | | | |
|---------------------------------|--------------------------------------|------------------------------|--------------------------------|-----------------------------------|
| ☐ People | ☐ other dog's | ☐ Men | ☐ Women | ☐ Children |
|---------------------------------|--------------------------------------|------------------------------|--------------------------------|-----------------------------------|

How does your dog behave around crowds of people? _____

How does your dog act when strangers come to the house? _____

How does your dog act when he meets or passes strangers away from the house? _____

Has your dog ever bitten a person or other dog (please specify which one)? _____

If yes please describe the situation and the seriousness of the bite: _____

How does your dog act when he meets strange dogs?

1. When both are on a leash: _____

2. When both are off leash: _____

3. When he/she is leashed and the other dog is free: _____

Is your dog frightened excessively by anything (check where appropriate):

☐ Thunderstorms/loud noises

☐ Other dogs

☐ Other (specify):

Does your dog chase (check where appropriate)?

☐ Running children

☐ Jogger

☐ Bicyclists

☐ Cats/other furry animals

☐ Cars

Does your dog urinate/ defecate in the house? How often and where? _____

Has your dog ever chase lights, his/her own tail, flies, reflections, or displayed any compulsive behavior, such as licking or flank sucking? _____

Do you consider your dog hyperactive? All the time or sometimes? When? _____

Behavior	NO	Mild	Moderate	Severe
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Does your dog follow you around the house?				
Does your dog become anxious at the sound of car keys?				
Does your dog become anxious when you put on your coat or shoes?				
Does your dog become aggressive when you leave?				
Does your dog exhibit other problem behaviors as your prepare to leave?				
Does your dog bark or whine excessively within 30 minutes of your departure?				
After you leave does your dog's activity decrease?				
After you leave does your dog appear depressed?				
After you leave does your dog have a loss of appetite?				
Only in your absence does your dog destroy property?				
Only in your absence does your dog urinate or defecate in your home?				
Does your dog regularly have diarrhea, vomit, or lick excessively in your absence?				
Does your dog exhibit an excessive greeting on your return (jumping, hyperactivity, barking, more than 2-3 minutes)?				

Cancellation Policy – Phone consult



We thank you so much for choosing Shannon Riley-Coyner owner of Ventura Pet Wellness & Dog Training Center as your phone consultant in regards to your animals behavior!

We also wanted to take a moment to remind you of our cancellation policy. First, we want to let you know that this policy is as important for you as it is for us. A strong cancellation policy keeps you accountable and ensures that you keep the commitment to yourself and your fur-baby. However, when clients know they will be charged for a session if they don't show up, it forces them to prioritize their appointments. This policy dramatically decreases no-shows and short-notice cancellations that do not adhere to our 72-hour cancellation policy. It is this type of consistency that ensures the best results for our clients.

Second, a cancellation policy is also important for us as a business. The average dog training facility can expect to experience a 25-40% cancellation rate of their weekly scheduled appointments. Can you imagine losing 25-40% of your business revenues or income every week?

A hair-stylist doesn't need such a strict policy because most people eagerly anticipate getting their hair done; a massage therapist wouldn't have to enforce as firm a policy because few people want to miss their massages. These industries don't suffer from the high rate of cancellations that a dog training business does. You see, when you make an appointment with your trainer, we reserve that time for you. Your trainer spends time preparing for your session and may drive quite a distance to be here for you. When a client cancels on short-notice, it is very difficult (and many times impossible) for us to make a connection with another client who could possibly take that appointment. That time then becomes lost and the revenues and loss to the trainers' income cannot be recovered. Other industries that suffer this type of cancellation rate have developed different systems for sustaining their business. The airline industry's strategy is to overbook appointments with the advanced knowledge that a certain percentage of people will not make their flights. We are unable to use this approach because there is no way for us to know who will cancel on short-notice and when. This type of approach would result in multiple double-bookings and upset clients every day. We hope you understand that we spend time regularly discussing this topic because we never want to institute policies that can potentially upset our clients. We recognize that we are in a difficult situation as a business: our number one priority is customer service, but how is charging a client for an appointment they cannot make a good customer service initiative? At the same time, if we do not have a strict policy, our business does not succeed.

Let's review our cancellation policy as stated in your Phone Consult Client Agreement Form: I understand that Ventura Pet Wellness & Dog Training Center operates on a scheduled appointment basis for all Phone Consultations and thus, requires that I provide 72 hours (business days) notice when canceling an appointment. No charge will be levied should I cancel with MORE than 72 hours (business days) notice given. Should I cancel a session with LESS than 72 hours (business days) prior notice, I will be charged in full for that session. I understand that Ventura Pet Wellness & Dog Training Center recommends that all cancelled sessions be rescheduled to ensure consistency and progress.

Our approach to dealing with this difficult situation is to begin by educating our clients in written correspondence as to why this policy is critical for them and for our business. We are confident that if you understand our predicament, you will make every effort to give us advanced warning of a cancellation and, in the event you have to cancel on short-notice, it will be easier for you to understand the charge knowing the background information. We also want you to know that we will make every effort as a business to try to reschedule your cancelled appointment as soon as possible with no additional charge. We are also sympathetic and understand that things come up that may force you to cancel unexpectedly (illness, work and home emergencies, etc.).

Thank you so much for your understanding! If you have any questions or concerns, please feel free to contact Ventura Pet Wellness & Dog Training Center at (805) 620-7616 or email us at shannonvpw@gmail.com

Office Hours: (different location then training center)
Monday through Friday from 8:30 am – 12:00 pm

Please read and check off each box before you sign.

- ☐ I hereby acknowledge that I have voluntarily applied to participate in dog training activities with Shannon Riley-Coyner RVT, CPDT-KA, KPA CTP and Ventura Pet Wellness & Dog Training Center.
- ☐ I am aware that there are inherent risks and hazards involved in activities with and around dogs, and I am voluntarily participating in these activities with knowledge of potential dangers. I am aware that any dog, regardless of training, handling, or environmental circumstance, is capable of biting and I expressly acknowledge the risks therein.
- ☐ In order to participate in dog training classes or other activities, I, being fully informed of such risks and hazards, agree to assume all risks of such occurrences.
- ☐ I hereby waive any and all claims or actions that I or my guardians or representatives may have, from any and all personal injury to myself, my dog, children in my charge, or harm to property or person caused directly or indirectly, through action or inaction of self or others, by acts that might occur in dog training classes, any other format of training activities or secondary training without trainer present or engaged.

- ☐ I agree to indemnify Shannon Riley-Coyner and affiliates from any and all claims by myself, member of family, or any agent while within training facilities, within my home property, or in the general public as a result of any action or inaction, of either my dog or any another.
- ☐ I also agree to assume sole responsibility for injury or damage caused by myself, children in my charge, or by the dog I own or handle and further agree to indemnify, defend and hold the instructors, trainers, assistants and property harmless from any damage, loss, liability or expense, including legal cost and attorney's fees, which result from damage caused by myself, children in my charge, or by the dog I own or handle.
- ☐ I have provided current vaccination documents from a licensed veterinarian.
- ☐ I have read the policies for dog training and I agree to adhere to them.
- ☐ I agree to pay the initial Phone Consultation deposit fee of \$200 prior to my scheduled appointment in order for my appointment to be held. The deposit fee will be used as the payment for the first session or will be credited towards any training package you may decide to purchase. Payment can be made via PayPal using our company name or email or by check payable to Ventura Pet Wellness mailed to **368 Saul Place. Ventura, CA 93004.**
- ☐ I understand that if I cancel my appointment with less than 72 hours (business days) notice my deposit will be forfeited. Deposits will be refunded for any cancellations before the 72-hour deadline minus a \$15 processing fee.

Client Signature _____

Date _____