



**TO BE COMPLETED ONLY IF YOU WANT TRAINING,
THIS FORM IS TO BE COMPLETED IN ADDITION TO THE CHEWIE'S APPLICATION**

Dog Training/Behavior Questionnaire

Date: _____

General Information:

Owner's Name _____ Spouse/Other: _____

Home phone _____ Cell phone _____ Work phone _____

Best way to reach you _____

Email address _____

Your Pet:

Pet's Name _____ Breed/mix _____

Age _____ Color _____ Weight _____ Birthdate _____

Sex		Male		Female
Spayed or Neutered? If yes, age at the time of surgery?		Yes		No
Did you notice any short or long-term changes in your dog's behavior after altering? If Yes, please explain		Yes		No
Was your dog altered because of a behavior problem? If yes, please explain		Yes		No
Does your dog have any medical conditions? If yes, please explain:		Yes		No
Is your dog currently given any medications? If yes, what medications?		Yes		No

Environment/Lifestyle:

Where did You Acquire Your Dog?	
Do you know the behavior of parents or litter mates?	
How old was your dog when you acquired it?	
Has the dog had previous owners? If yes, please explain	
How does your dog spend a majority of its time?	
How often your dog is exercised?	
How long is your dog exercised?	10min. 45min. 1hour 2hour
Briefly describe your dog's exercise routine:	
Does your dog have any exercise restrictions? If yes, please explain	
Has your dog been crate trained?	Yes No
Do you still use the crate?	Yes No
How many hours a day is your dog kept in the crate?	Less than: 5 hours 10 hours 15 hours

Family Relationships:

List each family member:

Name:	Sex:	Age:

List All Pets in your household:

Name:	Sex:	Age:	Interaction:

Has your household changed since acquiring your dog?	
Does your dog enjoy children?	

Describe how your dog reacts to guests and strangers:	
Describe your dog's behavior around other dogs:	

Training:

Has your dog had obedience training?	No	Yes, Group	Yes, Private	Yes, Home
How many weeks of training?				
What training school or professional trainer/behaviorist did you use?				
What training methods have you used?				
Flat Collar	Yes	No		
Martingale Collar	Yes	No		
Pinch Collar	Yes	No		
Choke Chain	Yes	No		
Choke Collar	Yes	No		
Electronic Collar	Yes	No		
Harness (Clips in back)	Yes	No		
Harness (Clips in front)	Yes	No		
Other No Pull Harness	Yes	No		
Normal 4-6' Leash	Yes	No		
Briefly describe your impressions and benefits from training				

Behaviors:

What do you consider your dog's most undesirable behavior?	_____		
<ul style="list-style-type: none"> When did you first notice the problem? How would you describe the severity of this problem? How often does the problem occur? Has there been a recent change in frequency or severity? 	Mild	Moderate	Severe
	Frequent	Occasionally	Rarely
	Yes	No	
<ul style="list-style-type: none"> Have there been any changes in the household that could help to explain the problem? 	Yes	No	if yes please explain: _____
<ul style="list-style-type: none"> What have you done so far to correct your dog's behavior problem? 			
<ul style="list-style-type: none"> Why do you think the dog is exhibiting the behavior problem? 			

Does your dog exhibit any of the following behavior problems?

Relevant behaviors	Approximate frequency		
House soiling(urination, defecation, marking, submissive urination)	Never	Occasionally	Often
Excessive barking or howling	Never	Occasionally	Often

Coprophagia (stool eating, other animal's feces)	Never	Occasionally	Often
Destructiveness (scratching, chewing, digging)	Never	Occasionally	Often
Jumping up (on guests or owners)	Never	Occasionally	Often
Mouthing on hands or clothing	Never	Occasionally	Often
Chases (cars, people, other dogs)	Never	Occasionally	Often
Object and food stealing	Never	Occasionally	Often
Dominance testing (pushy behavior)	Never	Occasionally	Often
Sexual behaviors (thrusting against humans, inanimate objects, roaming)	Never	Occasionally	Often
Overly submissive behavior	Never	Occasionally	Often

Response to People/animals	Growls	Glares	Bares Teeth	Snaps	Barks	Bites	Does Nothing
When eating							
When playing							
When chewing on a toy							
When approached while sleeping							
When punished							
When people visit							
When visitors enter yard							
When visitors arriving indoors							
When reached for or touched							
When being petted or hugged							
When being lifted							
When being moved off the furniture							
When trimming nails							
When cleaning ears							
When giving medications							
When grooming/bathing							
When rubbing belly							

When grasping collar							
While being put into a crate							

Any additional comments or information that you think the Trainer should know.

The Unconditional Canine Training Agreement and Release at Chewie’s Playland

This is an agreement made this _____ day of _____, 201__, by and between The Unconditional Canine at Chewie’s Playland and _____ an individual, herein referred to as “Owner”.

Following are terms of service for the stay of the Owner’s pet (Name)_____ as training guest of The Unconditional Canine at Chewie’s Playland:

1. By signing this and leaving your pet with Chewie’s Playland, Owner certifies to the accuracy of all information provided to Chewie’s Playland in writing or orally about the said Pet. Owner specifically represents that he or she is the sole owner of the Pet, free and clear of all liens and encumbrances.
2. Owner has filled out the main Chewie’s Application, provided medical history and has signed and understands the agreement and waiver.
3. Owner agrees to pay the agreed upon rate and that the Pet will not leave The Unconditional Canine at Chewie’s Playland facility until all charges due, are paid by owner.
4. Owner understands that there are inherent risks with training and boarding dogs and, while not common, injuries do occur. The Unconditional Canine at Chewie’s Playland will exercise reasonable care during the Pet’s stay.
5. Owner understands that a successfully trained dog will depend, not only on the training provided to said dog by The Unconditional Canine at Chewie’s Playland, but also on the continued structure and consistency that owner must apply once the dog has returned home. Owner also understands that, after returning home, following a residency program, the said dog will need continued structured aerobic and mental exercise, to maintain a healthy and respectful relationship with its owner. Owner also understands that due to the risk of owner inconsistency and dealing with live animals that no 100% guarantee can be offered in regards to the end result of the training program. Having stated this, The Unconditional Canine at Chewie’s Playland will do everything in their ability to create successful results with said dog and owner.

This agreement represents the entire understanding between the parties hereto. It may not be modified or amended unless in writing and signed by both parties.

Owner: _____

Print Name: _____