



coveted kennels &
sanctuary

WEBSITE CLIENT INFORMATION and
RELEASE FORM

CLIENT INFORMATION

NAME

ADDRESS

STREET

PHONE

HOME

WORK

EMAIL

CITY

PROV. POSTAL CODE MOBILE

EMERGENCY CONTACT

NAME

ADDRESS

PHONE

HOME

WORK

EMAIL

RELATIONSHIP TO YOU

CITY

PROV. POSTAL CODE MOBILE

VET CONTACT

VETERINARIAN NAME

ADDRESS STREET PHONE

CLINIC NAME

CITY PROV. POSTAL CODE EMAIL

DOG INFORMATION

- Name
- Breed
- Description / Colour
- Sex **M F**
- Age
- Spayed / Neutered
- Microchip / Tattoo Details
- How long have you had your dog?
- Where did you get your dog?
- Birthday
- Does your dog have dog tags Y/N
- Is your dog licenced with your Township? Y/N
- Licence number
- Which Township is your dog licenced to?
- Is the dog licence up to date?

- Height
- Weight

HEALTH INFORMATION

- What is your dog's general physical condition?
- Does your dog have any medical conditions? Y N
- If yes, please explain:
- Does your dog have hip dysplasia or arthritis?
- Any restrictions on activities?
- Is your dog prone to any allergies (food, environmental, etc.)?
- Does your dog have a history of eye, ear, or skin infections?
- Has your dog ever had hot spots?
- Is your dog on any medication? Y N
- If yes, please name the medication and their purpose(s):
- Is your dog on a flea/tick program?

FEEDING INFORMATION

- How is your dog's appetite?
- How often does your dog eat?
- What brand does your dog eat?
- Do you add any supplements to your dog's food?
- Are there any treats your dog may not have?
- Does your dog have any unusual eating habits?
- Do you leave food out of all the time? Y N
- Amount per serving?

GROOMING INFORMATION

- Does your dog like to be brushed? Y N
- Does your dog require frequent brushing? Y N
- How does your dog react to having her nails trimmed?
- How does your dog react to bathing?

- Has your dog ever had a skin reaction to certain types of shampoo or other grooming products?
- If yes, please explain:
Do you take your dog to a groomer? Y N
- If so, how often?

Behaviour Assessment

Item	Always				Never	N/A
	1	2	3	4		
Allows a friendly stranger to approach and speak to the handler without jumping or exhibiting shyness, fear, aggression or resentment.						
Politely accepts petting from a friendly stranger without any signs of shyness or resentment						
Accepts being groomed and examined by a stranger without having to be restrained.						
Walks politely on a loose leash.						
Walks politely and calmly beside handler in pedestrian traffic without becoming unduly stressed or unruly.						
Able to sit/down on command and stay in place						
Follows commands: Come Sit Heel Off/leave it Place						
Confident when faced with common distractions such as doors opening, joggers, etc. without showing aggression or fear.						
Able to be left alone with a person other than its handler, while maintaining a calm acceptance of the situation.						

General Behaviours	Destructive		Always		Never		N/A
	Yes	No	1	2	3	4	
Digging							
Roaming							
Chewing							
Mounting							
Barking							
Urine marking							
House soiling (urine)							
House soiling (stool)							
Stool eating							
Uncontrollable urination when frightened							
Uncontrollable urination when excited							
Bedwetting (while sleeping)							
Sleep disorders							
Hunting/predation							
Biting							
Excitability							
Chews/licks self							
Licks objects							
Eats non-food items							
General Behaviours	Yes	No	Always		Never		N/A
Eats non-food items			1	2	3	4	
Jumps up (owner)							
Jumps up (guests)							
On furniture where not permitted							
In rooms where not permitted							
Only listens when feels like it							
Pushy wants - own way							
Shyness/timid – non-aggressive (i.e. Ears back, cowering, tail tucked, shaking, retreating, hiding)							

Does your dog exhibit aggression in these situations?	Always	Never	
	1	2	3 4 N/A

Pet dog					
Hug dog					
Lift dog					
Call off furniture					
Pull/push off furniture					
Approach when sleeping					
Approach while eating					
Touch while eating					
Taking dog food away					
Taking toys/objects away- dog or human					
Approach while has toy/object -dog or human					
Approach while dog near partner					
Reaching towards dog					
Person entering or leaving room					
Staring at animal					
Verbally punish					
Physically punish					
Grooming/ trimming					
Giving medication					
Holding collar					
At the vets					
Response to children, toddlers or babies					
Unfamiliar person entering garden or house					
Familiar adult entering garden or house					
Familiar child entering garden or house					
People walking by when dog in car					
Stranger approaching owner – on lead					
Stranger approaching owner – off lead					
Dog in house, sees people outside					
Response to other dogs, while on lead					
Response to other dogs, while not on lead					

Aggressive behaviour towards people:	Always		Never		N/ A
	1	2	3	4	
Attacks are sudden and surprising					
Episodes appear unprovoked					
The dog is abruptly docile after an episode					
The dog appears “sorry” afterwards					
The dog appears disoriented afterward					
The dog appears anxious before the					
The dog appears anxious after the episode					
Episodes are associated with a “glazed” or absent look					
I can usually tell what will set my dog off.					
The aggressive behaviour is new and uncharacteristic					

Aggressive behaviour towards other animals:	Always		Never		N/ A
	1	2	3	4	
Attacks are sudden and surprising					
Episodes appear unprovoked					
The dog is abruptly docile after an episode					
The dog appears “sorry” afterwards					
The dog appears disoriented afterward					
The dog appears anxious before the episode					
The dog appears anxious after the episode					
Episodes are associated with a “glazed” or absent look					
I can usually tell what will set my dog off					
The aggressive behaviour is new and uncharacteristic					

When your dog exhibits unwanted behaviour

What have you done to try to correct the problem?

List any techniques that have had any success:

List any techniques that have made the problem worse:

How do you discipline your dog when it misbehaves?

Activity

Amount and frequency of exercise:

Type of exercise

Who exercises?

Amount and frequency of play:

Type of play

Who plays with dog? Human Y/N and/or other Dogs Y/N

How long is the dog home alone each day?

Dog's reaction when left alone?

Reaction prior to departure?

Reaction on return?

What kind of collar or harness do you use when you walk your dog?

When walking your dog on leash, what concerns, if any, do you have (i.e. pulling on leash, picking up garbage, leash reactivity, etc.)?

How would you describe your dog's energy level?

How often do you walk your dog?

Do you allow your dog off-leash? **Y N**

If yes, are there any concerns to be aware of when your dog is off-leash (i.e. prey drive, poop eating, resource guarding, etc.)?

How is your dog's recall when off-leash?

What is your dog's favourite activity at the park?

What kinds of toys does your dog like to play with?

Does your dog like to swim? **Y N**

Is it permissible for your dog to have playtime access to water/splash pool areas as they may get dirty/muddy? **Y N**

Training history

Describe any training

At what age did classes begin?

Who took the dog to training?

In what locations/situations are these activities most successful?

In what locations/situations are commands least successful?

Which family member(s) have most control?

Which family member(s) have least control?

Is there any other information we should know?

SLEEPING INFORMATION

- Where does your dog sleep at night?
- What does your dog sleep on?
- Has your dog ever been left overnight before? Y/N
- Is your dog allowed on the furniture or bed at home? Y/N

ADDITIONAL INFORMATION

- How did you hear about Coveted Kennels and Sanctuary?
- Do you or your dog have an Instagram account? Y/N
If so, share it so we can tag you through our own account
- Handle: @covetedkennelssanctuary

VETERINARIAN CLEARANCE FORMS

- Dog Owner's Name
- Breed
- Veterinarian

Please have your vet email covetedkennelsandsanctuary@gmail.com

Information Needed:

1. Dog's Name

2. Date of Birth
3. Clinic Name & phone number
4. Proof of vaccines and day administered:
 - Rabies
 - DHPP/ Parvovirus
 - Bordetella
 - Flea/Heartworm Prevention Program
 - Flea/Tick Prevention Program
 - When was the last fecal done?
 - Any dewormers in the heartworm medication?
 - Other medical information CKS should know about my dog:

SIGNATURE OF VETERINARIAN & DATE MUST BE ON VACCINE RECORDS