Introduction

This page covers what will need to be done with the completed questionnaire as well as permission statement, terms and conditions and basic information of yourself and your dog.

When completing this questionnaire please do so to the best of your ability and be as honest as possible.

Please make sure you read, sign and date the terms and conditions below when completing the questionnaire and complete whether you give permission for any photos/videos to be taken. You must complete all appropriate forms before booking the consultation and paying the deposit. The deposit is non-refundable and is removed from the package pricing.

Terms and Conditions

* If I do not hear anything from yourself regarding further services and you have not contacted with me within 60 days of enquiry then all personal information will be destroyed/deleted
* Services will be cancelled when summer temperatures exceed 25°C. For elderly dogs, puppies, and vulnerable breeds (pugs, bulldogs, boxers etc) this will be 23°C. This is to ensure the health and safety of the dogs during this period.
* All sessions (except assessment and follow ups) are an hour long and are in the owners home, however sometimes the issue will be elsewhere where this will be amended to account for this (where it is possible without compromising welfare).
* 10% off service for armed forces and emergency services with proof of valid and in date identification.
* All other offers are for highlighted service only
* Offers cannot be redeemed in conjunction with another offer
* If cancelling on same day services will NOT be eligible for any refund, unless in emergency circumstances (subject to decision) any other period will be eligible for a full refund for any payment
* Any unpaid invoices after the 30 working days shall be subject to additional late fees charges of 10% of total amount, of each day it is late.
* All data is kept confidential in accordance with the Data Protection Act (1998)
* No sharing or copying of information is allowed without appropriate permission unless on public sharing posts.
* No posting of negative/slandering posts due to being a small business owner, this can be detrimental to my livelihood, so I appreciate all concerns to be addressed to myself personally first.
* No copying or use of logo in accordance with copyright law.
* It is the law to ensure your dog has a collar and tag with NAME and ADDRESS on as well as microchipped in public place.

**I have read and agreed to the terms and conditions stated above**

**I do/do not (please delete as appropriate) provide permission for photos and videos to be taken of my dog and I understand all photos/videos will be kept in accordance with the data protection act (1988)**

**Client Signature:**

**Section 1: Basic Information**

Owner Information

Name: Phone Number:

Address: Email Address:

Postcode:

# Dog Information

Dog’s Name: Age: Breed:

Date of birth: Neuter/Spay Status including age when done:

Have you owned a dog before? Have you owned this breed before?

Any other pets? How would you describe your dog?

Was your dog from a breeder or rescue?

Do you know much about the history of the dog (rescue) or about the breeder (puppy)?

**Section 2; Behaviour Struggle**

Please tick if this is related to the sort of behaviours you are experiencing

**Resource Guarding; growling, nipping or biting in defensive of an object/space around;**

**PEOPLE**

Novel (new items) yes no

Food yes no

Spaces (aka sofa) yes no

People yes no

Other yes no

Please add details below:

**DOGS**

Novel (new items) yes no

Food yes no

Spaces (aka sofa) yes no

People yes no

Please add details below:

**Reactivity Behaviour; behaviours considered over the top for the situation;**

Dogs yes no

Vehicles yes no

People yes no

Children yes no

Animals (excl livestock) yes no

Livestock yes no

Cats yes no

Joggers yes no

Cyclists yes no

Other please give details;

**Seperation Anxiety; Paces, barks, whines when the owner;**

Leaves the home Yes No

Goes out the room Yes No

In preparation for going out yes No

Please add details below:

**Noise Phobia: Anxiety-like reaction to different noises;**

Thunder yes No

Fireworks yes no

Vehicles yes no

Gunshots yes no

Other loud noises yes no

Please add details below:

**Compulsive Behaviour: Repeated behaviour that causes significant distress**

Tail chasing Yes No

Light chasing yes no

Shadow chasing yes no

Self-injury (chewing/nipping skin) yes no

Fly chasing yes no

Other, please add details below

**Aggressive behaviour: Barking, Lunging, Nipping etc.**

Familiar people: yes no

Strangers (excl children) yes no

Children (known) yes no

Children (stranger) yes no

Other dogs (strangers) yes no

Other dogs (familiar) yes no

Please add details below:

**Section 3; Medical Information**

Has your dog needed to visit a vet over the last 6 months? If so for what reason?

Flea and tick prevention? Please state type and how often given?

Any physical problems that vet is aware of?

Is your dog currently on medication? Have they previously been on medication?

Please state Name and Dose

Has your dog shown any signs of pain or discomfort or has avoided contact with you since the behaviour issue(s) was noticed?

Does your dog have any food allergies? If so please provide details

How does your dog behave at the vets? Please describe any problems that you have noticed

Does your dog have any ongoing medical issues, if so please mention below

**Section 4: Diet**

What is your dog currently fed on? Please state how much and how often

Does your dog act protective around food? Do you need to be there when they eat?

Would you consider your dogs appetite good?

Do they eat fast or slowly? Any supplements?

 **Section 5: Training History**

Did you do any housetraining? If so how? What was your reaction to mistakes?

How much interaction did the puppy have in its first year?

What is your dog’s training history? Any puppy classes?

Any sport training history?

What training methods have the classes/yourself used?

Any bad experiences with trainers/classes?

**Section 6: General care and household information**

Is there any other pets in the household? If so, any problems themselves?

Is there any other people in the household and if so, how would you class the relationship between them and your dog?

How much of the following does your dog have per day;

Walks; Playtime with you;

Playtime/interaction with other dogs (outside household);

Rest/calm time; Sleep;

Time alone;