



## Pet Profile

Please complete the guest profile form for you and your pet (one per pet please). It helps us understand your pet's background, personality and special needs so we can make his/her visit at Willow Lodge as safe and comfortable as possible.



### Client Profile

Owner's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Email \_\_\_\_\_

#### EMERGENCY CONTACT(S):

Name \_\_\_\_\_ Number \_\_\_\_\_ Relationship \_\_\_\_\_  
My Veterinarian \_\_\_\_\_  
Clinic Address \_\_\_\_\_ Phone \_\_\_\_\_



### Pet Profile

Pet Guest's Name \_\_\_\_\_  
\_\_\_\_\_ Dog \_\_\_\_\_ Cat \_\_\_\_\_ Other \_\_\_\_\_  
Primary Breed \_\_\_\_\_ Color \_\_\_\_\_  
Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Spayed \_\_\_\_\_ Neutered \_\_\_\_\_ Approx. Weight \_\_\_\_\_  
Birthdate \_\_\_\_\_ How long have you had this pet? \_\_\_\_\_  
This pet is from: \_\_\_\_\_ Rescue \_\_\_\_\_ Store \_\_\_\_\_ Breeder \_\_\_\_\_ Stray \_\_\_\_\_ Other \_\_\_\_\_  
Obedience Education: \_\_\_\_\_ None \_\_\_\_\_ In-Home \_\_\_\_\_ Group Class \_\_\_\_\_ Private Lessons \_\_\_\_\_ N/A  
Does your pet come when called by name? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Has this pet ever been boarded before? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Describe your pet's experience: \_\_\_\_\_  
\_\_\_\_\_  
Has this pet ever been to Day Camp before? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Describe your pet's experience: \_\_\_\_\_  
\_\_\_\_\_



# Pet Profile

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## Personality Profile

### Attributes

- fence climber
- jumps
- protective
- fears noise/thunder
- housebroken
- afraid of men/women

### Personality

- outgoing
- verbally sensitive
- timid
- affectionate
- aggressive
- playful

### Behavior

- will bite
- growls
- snaps
- shows teeth
- trembles
- moves away

### My Pet:

- Grabbing collar
- Being around other dogs
- Being touched when asleep
- Being touched on ears
- Being touched on paws
- Being touched on tail

### Likes/ Dislikes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your pet engage in any unusual or repetitive behaviors?  Yes  No

If yes, explain: \_\_\_\_\_

Has your pet ever bitten a person?  Has your pet ever bitten another dog/animal?

If yes, explain: \_\_\_\_\_

Does your pet have any chewing issues when stressed or bored?  Yes  No

If yes, explain: \_\_\_\_\_

Additional information I would like you to know about my pet: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Medical Information

Has your pet ever had any surgeries? If yes, please explain and list dates: \_\_\_\_\_

\_\_\_\_\_

Does your pet have any old or current injuries/health concerns that require special attention?

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Does your pet suffer from:  Heart Disease  Respiratory Disease

Seizures  Allergies  Arthritis

If yes, are there any restrictions on your pet's activities or movements? \_\_\_\_\_

Is your pet using regular flea/tick preventative?  Yes  No

Is your pet taking any medication?  Yes  No

If yes, name the medication(s) and reason(s): \_\_\_\_\_

\_\_\_\_\_

Is your pet allergic to any medications, foods or treats?  Yes  No

If yes, list and describe the reaction(s): \_\_\_\_\_

\_\_\_\_\_