



# BELCONNEN DOG OBEDIENCE CLUB

## Dog Profile Form for Dogs Over 6 Months of Age

### OWNER DETAILS

Name: .....

Address: .....

Telephone: .....

E-mail Address: .....

State the reason(s) why you wish to enrol your dog in our training club: .....

.....

Have you trained a dog before?  Yes  No

If yes, what methods did you use (food / toys / correction chains / etc): .....

.....

### DOG DETAILS

Dog's Name: ..... Breed: ..... Date of Birth: .....

Sex:  Male  Female Desexed:  Yes  No Age when desexed: .....

How long have you had this dog? .....

Does your dog have any PHYSICAL problems that may affect training? .....

Does your dog have any BEHAVIOURAL problems that may affect group training? (eg, is the dog likely to lunge, growl, snap or bite other dogs): .....

.....

Where did this dog come from: (breeder / RSPCA / pound / rescue group / friend / pet shop)? .....

How many homes has your dog had (including yours)? .....

If the dog has been given up (rehomed), do you know the reason why? .....

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What commands (if any) does your dog reliably respond to (eg, sit, down, stay, wait etc)? .....

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Is your dog frightened of anything (eg, thunder, cars, bicycles, children, the vet, etc)? .....

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Has your dog done any of the following to:

Action	Adults in the family	Children in the family	Strangers
Growled			
Snapped (not made contact)			
Bitten			

If yes to any of the above, please provide details: .....

.....

What is your dog's reaction when friends or strangers come to your house? .....

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Has your dog been smacked:  Yes  No If yes, what were the circumstances? .....

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**DOG'S HISTORY**

As a puppy (0-9 months) did your dog:

- Meet many adults?  Yes  No      Have any unpleasant experiences with adults?  Yes  No
- Meet many children?  Yes  No      Have any unpleasant experiences with children?  Yes  No
- Meet many other dogs?  Yes  No      Have any unpleasant experiences with other dogs?  Yes  No

Please give details of any unpleasant experiences: .....

How old was your dog before it was taken out for walks? .....

How many times a day is your dog walked? ..... Total time (mins): .....

- Is the dog allowed off lead?  Yes  No
- Does the dog come back when called?  Always  Sometimes  Never
- Has your dog ever been in a fight with another dog:  Yes  No

If yes, how bad was the fight? .....

How old was the dog at the time? ..... Describe other dog: .....

- How does your dog react to other dogs?
- Plays     Growls     Ignores     Lunges forward     Barks     Fights

Are there different reactions for different dogs? .....

**MULTI-PET HISTORY**

Do you have another dog in the family?  Yes  No

If yes, please give details: Breed(s): ..... Age(s): .....

Number of each sex: ..... Male ..... Female    Are any of your other dogs a littermate of this dog?  Yes  No

How do your dogs interact with each other? .....

Are there any other pets in your household (please give details)? .....

**DOG HANDLING**

Can all adults in the household groom and handle your dog without it struggling?  Yes  No

How does your dog behave at the vet? ..... Does it have to be muzzled?  Yes  No

Where does your dog sleep at night? ..... Is your dog allowed inside your house?  Yes  No

Approximately how long does your dog have human company on a weekday? .....

Can you take the following objects from your dog easily?

- Bone     Toys     Food

What is/are your dog's favourite game(s)?

- Tug-of-war     Chasing     Games with squeaky toys     Wrestling with people     Dog does not play with toys

**DOG BEHAVIOUR WHEN LEFT AT HOME ALONE**

Does your dog do any of the following when left alone?

- Barks / howls     Scratches / digs     Messes / wets     Chews things it shouldn't     Escapes

**OTHER COMMENTS**

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