

Creature Comforts Pet Resort Individual Behaviors Pet Sheet

Please fill out for each pet you have on file with us / one sheet per pet

Owners Full Name: _____ Date: _____

Pet's Name: _____ Canine Feline Male Female Fixed? Yes No

Breed _____ Color: _____ Date of Birth/Approx. age _____

Has this pet been treated with Flea/Tick prevention in the last 30 days? [Yes No If Yes, what type? _____

If fleas or ticks are found on your pet, a medicated bath will be performed at your expense.

This charge will be \$100 minimum and clean up fees may apply.

Has your dog ever attended daycare before? Yes No How was that experience? Good Dog did not enjoy

Other: (please explain) _____

Has your dog /cat ever been professionally groomed? Yes No How was that experience? Good Bad

Other: (please explain) _____

Has your dog attended professional dog training classes? No Some basic Intermediate Advanced

Other: (please explain) _____

Are you interested in training classes or having your pet trained while boarding with us? Yes No

What are some of your pets favorite things?

Play Ball Long walks Play with other dogs Belly rubs Cuddle time Window watching

Playing with toys Brushing Sleeping Kong/Chews Sunbathing Lake/Pool

Other: _____

When your dog has to go to the bathroom, he/she will?

Bark Whine Sit by the door Pace near the door Ring Bell at door

Other: _____

What are you and your pets looking forward to at Creature Comforts Pet Resort? Excellent accommodations

Clean and Safe Facilities Staffed 24 hours One on One attention Opportunity to socialize Grooming

Has your dog/cat ever growled, snapped at, or bitten a person or another animal? Yes No

If Yes, please explain: _____

Any special notes, health problems, allergies, skin issues, recent surgeries, etc.? **Yes No** If Yes, please explain:

_____y of

Does your pet display any of the following:

Separation anxiety Excessive barking Coprophagia Fear of loud Potty pad trained

Not housed trained Toy/Food possessive Mouthiness Fear of Men/Children/Women

Sensitive to touch Fear Aggressive Fear of thunder Digs under fences Climbs/jumps fences

Destroys stuffed toys Destructive chewer Escape artist Slips easily on floors Prone to gastric upset

Uses a raised feeder Scratches/digs at doors Not crate trained Requires a harness for walking

Fence/crate protective Dislikes nail trims Dislikes water/bathing Leash aggression