

# BOARDING GUEST PROFILE

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[www.pawprintinn.com](http://www.pawprintinn.com)



Simply Pawfect

Please take a few minutes to complete this Profile for your pet, **one per pet** please. It will help us understand your pet's background, personality and special needs so we can make their visit at the Paw Print Inn® as safe and as comfortable as possible. Thank you for your time and cooperation.

## CLIENT PROFILE

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact(s): In the event of an emergency who do we contact first?

You  Emergency Contact

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Others authorized to pick-up my pet \_\_\_\_\_

Veterinary Clinic of Record \_\_\_\_\_

My Veterinarian \_\_\_\_\_

Clinic Address \_\_\_\_\_ Phone \_\_\_\_\_

## GUEST PROFILE

Pet Guest's Name \_\_\_\_\_ Nickname \_\_\_\_\_

Dog  Cat Breed \_\_\_\_\_ Color \_\_\_\_\_

Male  Neutered  Female  Spayed Weight \_\_\_\_\_

Birth date \_\_\_\_\_ How long have you had this pet? \_\_\_\_\_

This pet is from:  Rescue  Store  Breeder  Stray  Other \_\_\_\_\_

Professional Obedience Education:  None  In-Home  Group Classes  Private Lessons

Has this pet ever been boarded before?  Yes  No If no, why? \_\_\_\_\_

If yes, please describe your pet's experience: \_\_\_\_\_

Has this pet ever been to day care before?  Yes  No If no, why? \_\_\_\_\_

If yes, please describe your pet's experience: \_\_\_\_\_

### PERSONALITY PROFILE

Check all that apply:

#### ATTRIBUTES

- Fence jumper
- Fence climber
- Digger
- Jumps
- Protective
- Mouthy
- Paper/litter trained
- Independent

#### PERSONALITY

- Outgoing
- Verbally sensitive
- Timid
- Affectionate
- Pushy
- Aggressive
- Excitable
- Playful

#### BEHAVIOR

- Will Bite
- May bite
- Snaps
- Shows teeth
- Freezes
- Trembles
- Moves away
- Inappropriate chewing

#### MY PET:

- |                              |                                |                                   |
|------------------------------|--------------------------------|-----------------------------------|
| Grabbing collar              | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Getting hugs                 | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being brushed                | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being around other dogs/cats | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched while sleeping | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on ears        | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on paws        | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on mouth       | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on tail        | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Having nails clipped         | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being in a crate             | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being around children        | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |

#### PLAYS BEST WITH:

- No dogs
- Big dogs
- Little dogs
- Older dogs
- Younger dogs
- Puppies
- Other cats

Does your pet engage in any unusual or repetitive behaviors?  Yes  No If yes please explain (include examples): \_\_\_\_\_

Has your pet ever bitten a person?  Yes  No If yes please explain: \_\_\_\_\_

Has your pet ever bitten another pet?  Yes  No If yes please explain: \_\_\_\_\_

Has your pet ever growled/hissed at someone?  Yes  No If yes, what were the circumstances? \_\_\_\_\_

Are there any particular types of people your pet seems to fear or dislike?  Yes  No If yes, please explain: \_\_\_\_\_

Is your pet an escape artist?  Yes  No If yes, please explain: \_\_\_\_\_

Is your pet frightened of thunderstorms/loud noises?  Yes  No If yes, please describe what happens and how do you sooth your pet's fear: \_\_\_\_\_

Does your pet have any allergies?  Yes  No If yes, please describe: \_\_\_\_\_

Does your pet have any bathroom related issues or concerns?  Yes  No If yes, please explain: \_\_\_\_\_

Does your pet have any physical disabilities?  Yes  No If yes, please describe the disability and any physical restrictions you would like to have enforced: \_\_\_\_\_

Does your pet have any pre-existing medical conditions?  Yes  No If yes, please describe and advise of any medication used to control the condition (please include name and dosage): \_\_\_\_\_

Please provide details of your pet's diet – type (brand, kibble, canned, daily intake, etc): \_\_\_\_\_

Describe you pet's activity level: \_\_\_\_\_

Does your pet have any sensitive areas on his/her body?  Yes  No If yes, where? \_\_\_\_\_

Where are your pet's favorite petting spots? \_\_\_\_\_

**FOR DOG OWNERS ONLY**

Check one from the following; the level of socialization that best describes your dog's routine:

- None- No knowledge of other dog interaction
- Minimal- On lead encounters only
- Moderate- Some off-lead playtime on occasion with friend's/visitor's dog(s)
- Extensive- Regular visits to dog social events, daycare etc.

Are there any types and/or breeds of dogs your pet seems to automatically fear or dislike?  Yes  No If yes, please explain: \_\_\_\_\_

How does your dog react to another dog approaching it in a park or on a walk? \_\_\_\_\_

Does your dog play with other dogs?  Yes  No If yes, please describe size, breed and temperament of the other dogs? \_\_\_\_\_

- Male and Females
- Only Males
- Only Females

What kinds of games does your dog like to play with people? \_\_\_\_\_

What kind of games does your dog like to play with other dogs? \_\_\_\_\_

Has your pet ever growled or snapped at anyone who has taken his/her food or toys away from him/her?  
 Yes  No If yes, please explain: \_\_\_\_\_

**ACKNOWLEDGEMENT**

I certify that the above information is accurate to the best of my knowledge. I also understand that if any of the above information requires updating, I will provide an updated BOARDING GUEST PROFILE.

Owner's Signature \_\_\_\_\_ Date: \_\_\_\_\_