

# A dog's life... YOUR dog's life!

Date \_\_\_\_\_ Dog's name: \_\_\_\_\_  
 Owner's name(s) \_\_\_\_\_  
 Class:  Puppy Preschool  Family Dog Manners  Other \_\_\_\_\_

Do you have children?  Yes  No  
 If so, please provide name(s) and age(s).

\_\_\_\_\_  
 \_\_\_\_\_

Do you have other animals at home?  Yes  No  
 If so, please list.

\_\_\_\_\_  
 \_\_\_\_\_

Below is a list of behaviors. Please tick how they apply to your dog.

Behaviour	My dog doesn't do this	My dog does this and it is a problem	My dog does this but it is not a problem
Attention seeking			
Barking			
Biting			
Chasing			
Chewing			
Digging			
Eating feces			
Jumping up on people			
Licking			
Mouthing/play-biting			
Restlessness			
Submissive behavior			
Submissive urination			

Does your dog have problem behaviors not mentioned in this list?

\_\_\_\_\_

My dog (pick one):

- likes **all** other dogs
- likes **most** other dogs
- likes **some** other dogs
- does not like** other dogs

What do you expect from this class? \_\_\_\_\_

\_\_\_\_\_

*Thank you for helping us understand your dog. Please hand in this form at your first class, along with your registration form.*