

Consultation Registration Brisbane

BASIC HISTORY QUESTIONNAIRE

Please complete the pages below as accurately as possible.

1. Dog's name	
2. Your name	
3. Acquired where from and what age?	
4. Address	
5. Home phone #	
6. Mobile phone #	
7. Work phone #	
8. Email address Are you on Facebook? Y N	
9. Breed of Dog	
10. Sex of dog	
11. Dog's date of birth	Day___ Month___ Year_____
12. Dog's age at completion of this questionnaire	_____ months
13. Has this dog been neutered?	Yes / No
14. How old in months was the dog when neutered	_____ months
15. What was the reason for neutering?	
16. Any behavioural changes after neutering?	Yes / No If yes, what?

17. Has this dog been used for breeding?	Yes / No
18. If you have not bred this dog, do you plan on breeding him or her?	Yes / No
19. Any behavioural changes after breeding?	Yes / No If yes, what?
20. Has this pet had other owners?	
21. How long have you had this dog?	_____ months
22. Why did you get this dog?	
23. When was your dog last vaccinated?	
24. When was your last complete veterinary check up?	
24. Does this dog have any physical problems that your veterinarian has noted?	Yes / No If so what specifically
25. Is your dog taking any medication for the medical problems listed above?	Yes / No If so what specifically
26. Is your dog taking heartworm prevention?	Yes / No What brand
27. Is your dog taking flea or tick prevention?	Yes / No What brand
28. What food (brand names, amounts, and schedules) is your dog fed?	
29. What treats is your dog fed (brand names, amounts, and schedules)	
30. Does your dog get anything else to eat?	Yes / No If so what specifically
31. How is your dog exercised?	Is this dog Allowed to free run unsupervised _____ Fenced kennel run _____ Leash walked _____

32. How many walks does your dog get daily, and how long are these walks?	# walks _____ average length in minutes _____
33. How many play sessions does your dog get daily?	
34. How many training sessions does your dog get daily?	
35. How often is your dog groomed?	
36. Where is your dog left when you leave him or her alone?	Free in house _____ Free outdoors _____ Indoor kennel / run _____ Outdoor kennel / run _____ Crate indoors _____ Crate out door or garage _____ Behind a gate or door in house _____ Other please specify _____
37. What kind of living situation do you have?	Apartment _____ Townhouse _____ House with small yard _____ House with large yard _____ Farm _____
38. Has your household changed since acquiring this pet?	
39. Why did you choose this specific breed?	
40. Have you owned this particular breed before?	Yes / No
41. Have you owned a dog before?	Yes / No
42. Where does your dog sleep?	In your bed _____ On its own bed in your bedroom _____ In its crate in your bedroom _____ On its own bed in another room _____ On the floor next to your bed _____ In another room where ever it wants _____ In another room because it is locked from your bedroom, any where it wants _____

43. What is your dog's obedience /training history?	No school trained yourself _____ Puppy School _____ Group lessons - basic _____ Group lessons advance _____ Private trainer at house _____ Private trainer - sent to trainer _____ Agility _____ Flyball _____ Specialty training (hunting, herding, etc.) please specify _____
44. Age when your dog started lessons/ training	_____ months
45. How did the dog do at previous training?	
46. Who took the dog to training?	
47. Which school/ club did you attend?	
48. Does you dog have any obedience titles?	Yes / No
49. How well does your dog do with the following exercises?	Sit Perfect, OK, needs work badly Stay Perfect, OK, needs work badly Down Perfect, OK, needs work badly Wait Perfect, OK, needs work badly Walking on lead Perfect, OK, needs work badly Fetch Perfect, OK, needs work badly Leave it / drop it Perfect, OK, needs work badly Take it Perfect, OK, needs work badly Others please specify Perfect, OK, needs work badly
50. Please provide a brief outline of the chronological development of the problem, including any significant incidents that you think we should know.	

Please tick each box, which you feel applies to your dog:

Aggressive	<input type="checkbox"/>	Fearful of other dogs	<input type="checkbox"/>
Barks excessively	<input type="checkbox"/>	Dislikes grooming	<input type="checkbox"/>
Chews inappropriate objects	<input type="checkbox"/>	Jumps on people	<input type="checkbox"/>
Destructive	<input type="checkbox"/>	Likes to retrieve	<input type="checkbox"/>
Does not come when called	<input type="checkbox"/>	Likes to chase	<input type="checkbox"/>
Digs excessively	<input type="checkbox"/>	Difficult to toilet train	<input type="checkbox"/>
Anxious when alone	<input type="checkbox"/>	Pushy	<input type="checkbox"/>
Excess energy	<input type="checkbox"/>	Pulls on lead	<input type="checkbox"/>
Likes other dogs	<input type="checkbox"/>	Suffers car sickness	<input type="checkbox"/>
Likes new people	<input type="checkbox"/>	Unruly in car	<input type="checkbox"/>
Suspicious of strangers	<input type="checkbox"/>	Stubborn	<input type="checkbox"/>
Aggressive to other dogs	<input type="checkbox"/>	Plays too rough	<input type="checkbox"/>
Independent	<input type="checkbox"/>	Likes/tolerates children	<input type="checkbox"/>
Inappropriate biting	<input type="checkbox"/>	Attention seeking	<input type="checkbox"/>
Fearful of water /noise /storms	<input type="checkbox"/>	Fussy about food	<input type="checkbox"/>

Where did you hear about us?

Facebook/social media / brochure / friends / local vet / Pet City / website /

other _____

BEHAVIOUR PROFILE

Please complete the following pages as accurately as possible.

Describe the behaviour(s) you are concerned about.

When does this behaviour occur?

Who is present when the behaviour occurs?

Are there times when the behaviour is not a concern?

What is happening just before the behaviour?

Can you bring on the behaviour by doing something?

What usually happens immediately after the dog engages in the behaviour?

How do you react? Petting? Scolding?

What do family members or observers do when the behaviour occurs?

Is the dog getting rewarded for the behaviour?

Is the dog getting out of doing something with this behaviour?

Any further information.

Terms & Conditions

I understand and agree to take part in training with It's Not About The Dog! under the following conditions:

1. I shall be responsible for my dog's behaviour whilst training with It's Not About The Dog!
2. I shall indemnify you and/or any third party against any loss, damage or injury against which you and/or any third party might suffer directly or indirectly as a result of my dog or myself attending It's Not About The Dog!
3. Payment is required 7 days prior to appointment day.
4. I understand that 24 hours notice must be given of cancellation of a consultation/lesson or the full fee will be charged.
5. To secure your appointment payment must be made no later than 7 days prior to your 1st lesson/consultation
6. Payment is non-refundable unless 7 days notice is given.
7. If a cancellation is made more than 7 days of commencement of a program, a full refund will be given minus \$30 for an administration fee.

Signed: _____ Date: _____

**Upon completion of this form please email back to email:
info@itsnotaboutthedog.com.au**

Cost: includes training manual + written training modification program.

Payment:

Direct Debit Payment

Bank: Westpac Morningside

Account Name: Zigrid Phillips

BSB: 034 -058

Account Number: 136870