

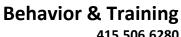




Available B&T Services

## **Canine Behavior History**

Consult Inform	nation							
Consult Date  Consult Time  Consultant			_	Scheduled By				
			Date Scheduled					
			_ A	Assistant				
<ul><li>Fees a</li><li>Reque hours</li></ul>	re \$95 per sessi ests for cancellat prior to the con	are 75 minutes. on plus \$40 per hations must be received in order to recured for cancellation	ived by email active a refund	at <u>OhBehave@</u> . All refunds a	<mark>MarinHur</mark> re subject t	mane.org to a 10%	processing fee.	
Guardian's Inf	ormation							
Name								
Address			City, State Zip					
Phone			Email					
Household Inf	ormation							
How many	adults live in the	household?						
How many	children and their	r ages?						
Are there o	ther dogs in the h	nousehold? If so, how	w many and wh	at ages?				
Other pets	in the household?	?						
Type of hor	☐ Condo/Apa	rtment						
Fenced Yard	d? 🗆 Yes	s 🗆 No						
Your experi	ence level as a do	og owner 🔲 First	Time Owner	☐ Somewh	nat Experien	ced	☐ Experienced	
Dog's Informa	ition							
Name			Age					
Breed			Weight					
Gender	$\square$ Male	$\square$ Female	Spayed	/neutered?	$\square$ Yes	$\square$ No		
			If so	. what age?				







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## Dog's History

A Day in the Life of your Dog:								
Where did you get your dog? Dog's age when acquired?								
Where does your dog sleep at night?								
What type of exercise does your dog get on a regular basis?								
Does your dog go to the dog park? $\Box$ Frequently $\Box$ Occasionally $\Box$ Once or twice $\Box$ Never								
Does your dog go to daycare or have a dog walker? $\square$ Yes $\square$ No								
Is your dog crate trained?								
Health Information:								
Does your dog have any physical problems?								
Is your dog taking any medications?								
What type of food do you feed your dog?								
How many feedings per day? $\ \square$ Once $\ \square$ Twice $\ \square$ Three times $\ \square$ Free feed								
Behavior History:								
Have you met with a behavior consultant about your dog in the past? $\ \square$ Yes $\ \square$ No								
If yes, when, where, and for what behaviors?								
Has your dog ever bitten or snapped at: $\Box$ A Person $\Box$ Another dog $\Box$ Another animal $\Box$ N/A								
If yes, please explain the situation?								
Is your dog overprotective of: $\Box$ Food $\Box$ Toys $\Box$ Property $\Box$ You or another person $\Box$ N/A								
If yes, please explain?								
Has your dog ever been attacked? $\square$ Yes $\square$ No								
If yes, please explain the situation?								
Training History:								
Have you taken a training class with your dog? $\ \square$ Yes $\ \square$ No								
If yes, when, where, and to what level?								
List three (or more) activities that your dog loves!								
List three (or more) foods that your dog loves!								
Tell Us In Your Own Words:								

Please describe your dog's behavior problem(s).







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When were the problems first noted?
How often do the problems occur?
What has been done so far to correct the problems? Type of discipline, confinement, training, etc.
What was the dog's response to these corrective measures?
What are your goals for your dog?
What behavior issues can you live with?