

Please fill out both sides of this form and return it to us, or bring it to the first night of class

AnimalHouse Group Class Registration Form

Owner: _____

Address: _____ City and Zip: _____

Phone: (Home): _____ (Work): _____

Dog's Name: _____ Breed: _____ Age: _____ Male Female Spayed Neutered

How many dogs do you own? _____ Has this dog ever been to an obedience class? _____

Do you plan to show your dog in AKC dog shows or obedience trials? _____ Has your dog ever bitten anyone? _____

Where did you get your dog? Professional Breeder Newspaper ad Animal Shelter Pet Store
Stray Friend or relative Other _____

How old was your dog when you obtained him? _____ How long have you had him? _____

When was your dog last seen by a vet? _____ Does he get annual exams? _____

Is your dog on any medications? _____ What and why _____

How often is your dog groomed? _____ How often are his nails clipped? _____

Where does your dog live? Mostly inside our house, loose Loose in our yard Outside, in a dog pen
Outside, chained to a tree or pole Both inside and outside

Where does your dog sleep? Outside, garage or yard Inside, crated Inside, in his own bed
Inside, loose On my bed or my child's bed Other _____

Is your dog housebroken? Always Usually Sometimes Rarely Never On a good day

How is your dog fed? Food is left out for him to eat when he pleases He is fed once a day Twice a day

How does your dog react to being left alone? _____

How would you describe your dog's personality? Check all that apply:

| | | | |
|----------------|------------------|-------------|------------|
| Shy or fearful | Friendly | Happy | Dominant |
| Nervous | Social Butterfly | Calm | Aggressive |
| Hyperactive | Playful | Bored | _____ |
| Jealous | Indifferent | Territorial | _____ |

What bad habits does your dog have? Check all that apply:

| | | | |
|--------------------|-----------------------------|-----------------|--------------------|
| Soils in the house | Growls | Digs | Chases things |
| Separation Anxiety | Bites (incl. "play biting") | Chews | Jumps on furniture |
| Hyperactive | Fights other dogs | Barks | Marks in the house |
| Runs away | Barks / lunges at people | Jumps on people | Plays keep away |

How does your dog react to: Children _____ Strangers _____

Crowds _____ Other adult dogs _____

What do you hope to get out of this class? What are your goals with your dog? _____

What activities do you enjoy, or would you like to try, with your dog? _____

I wish to enroll my dog in a group dog class under the direction of Animal House. I understand the program will cover basic on-leash obedience commands, help me alter or eliminate my dog's behavior problems, and gain an understanding of basic care of my dog. I understand that my success or failure in this program is based primarily on my willingness and ability to work with my dog. As legal owner of my dog, having carefully read this agreement, I do hereby waive and release Animal House from any and all liability of any nature, to include any injury, death, disease, sickness or damage I or my pet may suffer during or after training. I also agree to indemnify and hold harmless Animal House from any and all claims due to any damage my pet may cause to any other animals, persons or third parties during or after training. I understand that all fees are due by the first day of class, and that there are no refunds after the first class date; instead, credit will be issued to me for a future group class for this or any other dog I own.

Owner's Signature

Date:

Dog Personality Profile

Please answer the following questions about your dog, using ***only*** these scores:

Almost Always = 10

Sometimes = 5

Hardly Ever = 0

Prey Drive

Does your dog:

1. Sniff the ground or air a lot? _____
2. Get excited by moving objects, such as bikes or squirrels? _____
3. Stalk cats, other dogs, or things in the grass? _____
4. When excited, bark in a high-pitched voice? _____
5. Pounce on his toys? _____
6. Shake and "kill" his toys? _____
7. Steal food or garbage? _____
8. Rip soft objects or stuffed toys apart? _____
9. Wolf down his food? _____
10. Like to carry things? _____
11. Like to dig? _____
12. Like to bury things? _____

Pack Drive

Does your dog:

1. Get along with other dogs? _____
2. Get along with people? _____
3. Bark when left alone? _____
4. Solicit petting, or like to snuggle with you? _____
5. Like to be groomed? _____
6. Seek eye contact with you? _____
7. Follow you around like a shadow? _____
8. Play a lot with other dogs? _____
9. Jump up to greet people? _____
10. Show reproductive behaviors, such as courting or mounting other dogs? _____
11. Respond to verbal praise? _____
12. Tremble or whine on stays? _____

Defense / Flight Drive

Does your dog:

1. Run away from new situations? _____
2. Try to hide behind you when he feels scared or uncertain? _____
3. Act fearful in unfamiliar situations? _____
4. Tremble or whine when upset? _____
5. Crawl or show his belly when reprimanded? _____
6. Come to you reluctantly when called? _____
7. Have difficulty standing still when groomed? _____
8. Cringe when someone new bends over him? _____
9. Urinate during greeting behavior? _____
10. Urinate when he thinks he's made a "mistake"? _____
11. Tend to growl or bite when cornered? _____
12. Put his hackles up when meeting strangers? _____

Defense / Fight Drive

Does your dog:

1. Stand his ground or go towards and investigate strange sounds or objects? _____
2. Like to play tug-of-war games to win? _____
3. Bark or growl in a deep tone? _____
4. Guard his "personal space"? _____
5. Guard his food or toys? _____
6. Guard your yard and home? _____
7. Dislike (or is indifferent to) being petted? _____
8. Dislike being groomed or bathed? _____
9. Growl or bite leash when corrected? _____
10. Try to dominate other dogs? _____
11. Like to fight other dogs? _____
12. Get picked on by older dogs? (either now or when he was younger?) _____

Scores:

Prey Drive: _____ Pack Drive: _____ Defense / Flight: _____ Defense / Fight: _____