



# DOG INFORMATION

281 S. McDuff  
Jacksonville, FL

thebarkinglot.us  
(904) 384-2111

**PLEASE NOTE: A SEPARATE FORM MUST BE FILLED OUT FOR EACH DOG IN YOUR FAMILY**

## **PART I**

**NAME:** \_\_\_\_\_

**GENDER:**       Female       Male

**BREED:** \_\_\_\_\_ **COLOR:** \_\_\_\_\_

**WEIGHT:** \_\_\_\_\_ **BIRTHDAY:** \_\_\_\_\_

**MY DOG WILL NEED LUNCH:**       yes       no

I would like BARKING LOT to provide food:       yes       no       I will provide my own

Amount per feeding: \_\_\_\_\_

### **DATE VERIFICATION REQUIRED FOR THE FOLLOWING:**

RABIES: \_\_\_\_\_ BORDATELLA: \_\_\_\_\_ FLEA PREVENTION: \_\_\_\_\_

DISTEMPER/PARVO: \_\_\_\_\_ FECAL TEST: \_\_\_\_\_ HEARTWORM: \_\_\_\_\_

**MY DOG IS SPAYED/NEUTERED:**      yes  no       IF NO, WHEN SCHEDULED? \_\_\_\_\_

### **HAS THIS DOG EVER SHOWN THE FOLLOWING BEHAVIORS:**

**Aggressive tendencies toward people or children?**  yes  no      If yes, describe below.

**Aggressive tendencies toward other dogs?**  yes  no      If yes, describe below.

**Ever bitten a person or child?**  yes  no      If yes, describe below.

**Ever bitten another dog?**  yes  no      If yes, describe below.

**Ever growled, snarled or bared teeth?**  yes  no      If yes, describe below.

**If you answered yes to any of the questions above, explain here (use back of page if necessary):** \_\_\_\_\_

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**I HAVE THE FOLLOWING SPECIAL CONCERNS REGARDING MY DOG'S BEHAVIOR:** \_\_\_\_\_

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**MY DOG NEEDS MEDICATIONS:**       yes       no

Type: \_\_\_\_\_ Reason: \_\_\_\_\_ Frequency: \_\_\_\_\_ Amount: \_\_\_\_\_

### **MY DOG HAS A PAST ILLNESS/INJURY OR CURRENT CONDITION THAT REQUIRES SPECIAL CARE:**

yes       no      If yes, please explain: \_\_\_\_\_

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## PART II

**MY DOG IS HOUSE BROKEN:**  yes  no

The last accident he/she had was: \_\_\_\_\_ Where: \_\_\_\_\_

Why: \_\_\_\_\_

**MY DOG PLAYS BEST WITH:**  big dogs  little dogs  older dogs  young dogs  puppies

**MY DOG IS: (circle all that apply)**

shy  mellow  aggressive  excitable  active  a couch potato  content to be around others

**MY DOG'S FAVORITE ...**

Toy(s): \_\_\_\_\_ Toy to destroy: \_\_\_\_\_

Activity: \_\_\_\_\_

Place in the house: \_\_\_\_\_

What happens when you or somebody else tries to take food or toys from your dog? \_\_\_\_\_

Does your dog jump up on you? \_\_\_\_\_

Has your dog ever jumped or climbed over a fence? \_\_\_\_\_

If yes, how high was the fence? \_\_\_\_\_

**HAS YOUR DOG HAD OBEDIENCE TRAINING?** \_\_\_\_\_

**MY DOG KNOWS THE FOLLOWING COMMANDS:** \_\_\_\_\_

**MY DOG IS TRYING TO LEARN THE FOLLOWING COMMANDS:** \_\_\_\_\_

**MY DOG IS EASILY SCARED BY:** \_\_\_\_\_

**MY DOG IS ALLOWED ON FURNITURE AT HOME:**  yes  no

no **BUT** is okay at BARKING LOT

**REASON FOR USING A DAYCARE SERVICE:** \_\_\_\_\_

**ADDITIONAL INFORMATION** I would like you to know about my dog: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I CERTIFY THAT I AM THE LEGAL OWNER OF THE DOG NAMED ABOVE AND THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT. I FURTHER AGREE TO IMMEDIATELY SUPPLEMENT THIS INFORMATION IN WRITING SHOULD ANY CHANGES OCCUR, INCLUDING BUT NOT LIMITED TO, CHANGES IN MY DOG'S HEALTH, BEHAVIOR, NEEDS OR LIMITATIONS.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_