



Class Start Date/Time: _____

OWNER'S INFORMATION:

Name: _____ Home Phone: _____
Cell Phone: _____ E-mail: _____
Address: _____ City: _____ Zip Code: _____
Emergency Contact (other than self): _____
Relationship: _____ Phone: _____
How Did You Hear About Alpha K9 U? _____

DOG'S INFORMATION (GENERAL):

Dog's Name: _____ Sex: Male Female
Breed: _____ Colors/Markings: _____
Birthdate: _____ Spayed/Neutered: Yes No
How long have you owned dog: _____

Pet's Health Record (must be accompanied by veterinarian records):

Veterinarian: _____ Phone: _____
Do you use Flea/Tick Preventative: Yes No Last Given: _____
Any known allergies, medical problems or restrictions: _____
Has your dog ever been diagnosed with Giardia: _____
If yes, when: _____

Personality

Is it okay for your dog to play with other animals: Yes No
If no, please explain why: _____
Does your dog socialize/play with other dogs on a regular basis? Yes _____ No _____
If Yes, Please Describe: _____
Has your dog shown any aggression toward other animals or people: Yes No
If yes, please describe: _____
Has your dog ever bitten or been bitten: Yes No
If yes, please describe: _____
Describe how your dog reacts to guests and/or strangers: _____

Describe Your Dog's Personality (mark all that applies):

- | | | | |
|---|---|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Mellow/calm | <input type="checkbox"/> Shy/Submissive | <input type="checkbox"/> Playful | <input type="checkbox"/> High Energy |
| <input type="checkbox"/> Dominant/Alpha | <input type="checkbox"/> Well Behaved | <input type="checkbox"/> Unruly | |

Please Mark All That Apply to Your Dog:

- | | | |
|--|--|---|
| <input type="checkbox"/> Food Possessive | <input type="checkbox"/> Toy Possessive | <input type="checkbox"/> Jumps Up On People |
| <input type="checkbox"/> Barks Excessively | <input type="checkbox"/> Mouthy / Bites | <input type="checkbox"/> Chews Excessively |
| <input type="checkbox"/> Digs | <input type="checkbox"/> Separation Anxiety | <input type="checkbox"/> Fear of Loud Noises |
| <input type="checkbox"/> Eats Feces | <input type="checkbox"/> Does Not Obey | <input type="checkbox"/> Timid |
| <input type="checkbox"/> Eats Rocks | <input type="checkbox"/> Jumps Fences | <input type="checkbox"/> Destroys Toys/clothing |
| <input type="checkbox"/> High Strung | <input type="checkbox"/> Growls at Strangers | <input type="checkbox"/> Destroys Furniture |

What commands does your dog know (Please List): _____

What do you consider your dog's most undesirable behavior: _____

What do you do to correct your dog's behavior problems: _____

Has your dog ever been to Obedience School: Private Group Board & Train

What training facility or professional trainer/behaviorist did you use: _____

Briefly describe your impressions and benefits from training: _____

To the best of my knowledge, the information that I have provided is both accurate and true. I also acknowledge that I have read, understand, and agree to abide by the Policies and Procedures attached hereto.

Owner's Signature: _____

Owner's Name (Please Print): _____

Date: _____

Alpha K9 U, LLC Vaccination Policy: All canine guests must have hard copy documentation (from a veterinarian) of up-to-date vaccinations and current negative fecal (hard-copy laboratory results) in order to enter the Alpha K9 U premises, at any time, for any reason (including tours). Alpha K9 U requires Rabies, DHPP (Distemper, Hepatitis, Parainfluenza, Parvovirus), Bordetella, and a negative fecal float. If your puppy or dog will be utilizing our Aquatic Center, in any capacity, fecal exam/screening (Ova and parasite with Giardia ELISA) is mandatory every six (6) months so please make sure to ask your vet to perform both fecal tests on the single stool sample that you provide: The "O&P (ova and parasite) FLOAT" and "Giardia ELISA test or Giardia Snap Test".

For your dog's safety and well-being, please allow a minimum of forty-eight (48) hours after receiving vaccinations such as Distemper and/or Rabies and up to fourteen (14) days after receiving a Bordetella vaccine for maximum effect before entry. If the Bordetella vaccine has never been given, has expired, or was given intranasal (drops in the nose), it must be administered AT LEAST FOURTEEN (14) DAYS prior to arrival at Alpha K9 U, no exceptions! If the Bordetella vaccine is being boosted a minimum of FIVE (5) days is required before entry. Puppies are required to have their second set of DHPP and Bordetella vaccinations, and are required to have their Rabies vaccination (at 16 weeks of age). You or your veterinarian's office can easily fax documentation to # 317-284-1354 or email documentation to Rachel@alphak9u.com.