



Dog Information

Dog Name: _____ Nickname: _____

Breed: _____ Color/ Description: _____

Age: _____ Birth date: _____ Sex: M / F *Spayed or Neutered: Y / N

Rattlesnake Vaccine: Yes / No Date issued _____ Micro chipped: Yes / No microchip ID # _____

How long has the dog been in your household? _____

Whom else (human or animal) resides in the home _____

**Current Flea/tick Medication: _____ Date last applied _____

**If your dog is found to have fleas/ticks while in the care of run-a-muk Unleashed! We will administer the appropriate treatment at the owner's expenses.

Feeding Instructions & Health History

How many times a day is your dog fed? _____ Please check all that apply: AM _____ Mid Day _____ PM _____

How much is your dog fed **at each feeding**? _____ Is your dog allowed treats? Yes _____ No _____

What brand/type of food do you feed your dog? _____

Does your dog have any allergies: Yes _____ No _____ If yes please explain what the allergy is and reaction if exposed:

Is your dog given any Vitamins/Supplements/Medications on a regular basis? Yes _____ No _____ If so please complete

Name:	Dosage:	Frequency:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does your dog have current/previous health issues that we should be aware of? If so what are they? _____



Temperament and Socialization

How would you best describe your dog's personality? Please be as specific as possible: _____

What activities does your dog participate in? (i.e., dog parks/doggie day care/neighborhood walks/multiple dog family/group training/other) _____

How often? _____ How recent? _____

List your dog's likes and dislikes: _____

Describe your dog's perfect day: _____

If you could change any 2 things about your dog what would they be and why? _____

What are the 2 things you love most about your dog? _____

What else should we know about your dog to make his/her time at run-a-muk more enjoyable? _____



Behavior

If there are any situations, types of people, other dogs or objects which make your dog uncomfortable please describe your dog's reaction and what if anything has helped: _____

Under what circumstances does your dog bark: _____

Please describe how your dog behaves on a leash: _____

Is your dog an escape artist? Please explain: _____

Does your dog like to chew on anything inappropriate? _____

Has there ever been an altercation which resulted in your dog being bitten by or biting another dog? Describe the bite wound, location and circumstances leading up to the altercation: _____

Has there ever been a situation where your dog bit a person? Please describe the nature of the wound and the circumstances leading up to the bite: _____

Is your dog afraid of any certain type of dog? (i.e., large/small/male/female): _____

Access to the play yard is via stairs and the property is enclosed with a 6' cyclone fence equipped with a top perimeter electric wire. Do any of these things cause concern for the safety of your pet? If yes please describe your concern: _____

- **run-a-muk Unleashed! requires all dogs over the age of 6 months to be spayed or neutered**
- **run-a-muk Unleashed! requires all dogs over the age of 4 months to have the following current immunizations - Rabies (1st annual or every 3 years), DHLPP (1st annual or every 3 years), Bordetella (annual) Current shot records from your Veterinarian office must be provided for verification.**
- **run-a-muk Unleashed! Will not allow any dog to stay-n-play with a prong collar, choke collar (chain, nylon, etc.) or any collar deemed unsafe to the pet or others based on but not limited to material, wear, fit or function. A flat collar with the dogs name (tag or embroidered) is necessary while at run-a-muk Unleashed!**