



Canine Clubhouse

7501 Linglestown Road, Harrisburg, PA 17112 • Ph: 717-614-1513 • info@canine-clubhouse.com

Enrollment Form

Owner Information:

Name: _____

Address: _____

Phone: _____

Alt. Phone: _____

Email: _____

Emergency Contact:

Name: _____

Phone: _____

General Info:

How did you hear about Canine Clubhouse? _____

Dog's Name: _____ Age: _____ Sex: _____

Type of Dog: _____

Spayed/Neutered: YES NO

How long have you owned your dog? _____

Does your dog like children? YES NO

Do you have other animals? YES NO

If yes, what kind? _____

Can your dog have treats? YES NO

If no, why not? _____

If no, any restrictions? _____

Does your need a lunch? YES NO

If yes, will you provide? YES NO

Health and Grooming:

Does your dog have allergies? YES NO

If yes, what kind of allergies? _____

Does your dog have dysplasia or arthritis? YES NO

If yes, where? _____

Does your dog have sensitive spots? YES NO

If yes, where?

What flea/tick treatment is your dog on? _____

How does your dog react when you clip his/her nails?

Is your dog on any medication(s)? YES NO

If yes, what type and dosage? _____

Any other health issues we should know about?

Behavior:

Has your dog has any training? YES NO

If yes, what kind and where?

What commands does he/she know?

Do you use a crate at home? YES NO

Is your dog comfortable in crates for nap time? YES NO

If not, please explain: _____

Does your dog chew on bedding in crates? YES NO

How does your dog react around other dogs?

Is there anything your dog is afraid of? If yes, what?

How does your dog react to strangers (people)?

Has your dog ever jumped a fence? YES NO

If yes, how high was the fence? _____

Does your dog dig in the ground? YES NO

If yes, where?

Has your dog ever shown aggression with:

Dogs? YES NO

Explain: _____

People? YES NO

Explain: _____

Food? YES NO

Explain: _____

Toys? YES NO

Explain: _____

How does your dog react to puppies?

Is your dog potty-trained? YES NO

When was his/her last accident in the house?

Does your dog have any issues with the following behaviors?

Mouthing: YES NO

Explain: _____

Barking: YES NO

Explain: _____

Jumping: YES NO

Explain: _____

Other: _____

Anything else you feel we should know?
