



gentle guide canine services

dog walking ~ in-home boarding ~ cat visits

insured ~ reliable ~ pet first aid & CPR certified

contact Alison @ 647.298-3005

E: gentle.guide@hotmail.com

CLIENT INFORMATION FORM

Client Name:.....

Address:.....

Home Phone Number:.....

Work Phone Number:.....

Cell Phone Number:.....

Emergency Contact:.....

E-mail:.....

Dog's Name:

Age:

Breed:

Color/Markings:

Sex: M or F _____ Neutered / Spayed _____

Rabies tag #:

License #:

Feeding (where applicable):

What kind of food/s does your dog eat?

When does your dog eat?

Special feeding instructions:

Medication:

Is your dog on any medications that must be administered? If yes, please describe the medication procedures including the name, and dosage.

Flea/Tick Medication:

Is your dog currently on prescribed medication to control fleas/ticks?

* **REQUIRED***



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Does your dog need a special harness for walks?

Does your dog have a favourite game?

Does your dog have a favourite toy?

Do you prefer on or off-leash walks for your pet?

Characteristics:

Please answer the following questions about your dog. It will help us to provide better care for him/her:

Your Dog ~

Is friendly with other dogs: **YES / NO**

Likes children: **YES / NO**

Must stay on-leash during walks: **YES / NO**

Is allowed to have treats: **YES / NO**

Obeys basic commands: **YES / NO**

Has bitten people or other dogs: **YES / NO**

Has shown other problem behaviour: **YES / NO**

(If yes, please describe – e.g. "chases joggers"):

Is fearful of noises or other things: **YES / NO**

Is afraid of thunder/dislikes inclement weather: **YES / NO**

Other:



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Please add anything else about your dog's habits or behaviour that would be useful to us in providing proper care:

Date & time of Drop-off:

Date & time of Pick-up:

Thank you!!!

By signing below, you acknowledge that **gentle guide canine services** personnel may enter your home for the purpose of picking up/returning your pet and transporting your pet by car. You also agree to, and understand, the following:

1. To pay all invoices in full, for services rendered, within seven days of receipt.
2. To give 24 hours notice in the event of cancellation.
3. That your pet has a valid license with Toronto Animal Services. If your pet license is invalid, you agree to reimburse "**gentle guide**" the cost of all fines incurred.
4. To be solely financially responsible for any property damage or personal injury caused by my pet(s) while under the care of "**gentle guide**".

Signature:

Date: