

Home Away From Home Kennels Dog History Questionnaire

Date: _____

Owner Name: _____ Pet Name: _____

1. Has the dog named above ever boarded before? Yes No

If yes, was it at : Veterinarian Clinic Kennel

Did your dog stay in a : Run Cage

How long was your dog's last stay? _____

If yes, did your dog experience any of the following:

Circle and/or Check Mark

Weight loss or weight gain	
Diarrhea or loose stools	
Vomiting	
Change in appetite	
Change in usual activity level	
Excessive drinking	
Change in personality	
Came home w/fleas or ticks	
Coughing or sneezing	

2. What brand of food does your dog eat at home? _____ Dry Only Wet Only Mix

3. Important Things To Mention About Growths, Tumors, Recent Surgery, Hot Spots, etc...or past issues that might arise during their stay:

Food Allergies _____

Face/Eyes/Mouth _____

Eyes _____

Ears _____

Legs/Paws _____

Body _____

Stomach _____

Hind Area/Tail _____

Easily Overheats _____

Other _____

4. Is your dog on monthly heartworm prevention? Yes No
If yes, which brand of heartworm prevention is he/she on? _____

5. Do you routinely use a flea &/or tick treatment on your dog? Yes No
If yes, which brand of prevention is he/she on? _____
How is it applied? _____

6. Have you ever seen your dog interact with other dogs (not from the same household)?
 Yes No If yes, briefly describe his/her experience?

7. Does your dog :
Jumps Fences Yes No Dig Under Fences Yes No Climb Fences Yes No

8. Does your dog do well with strangers? Yes No
Briefly explain: _____

9. Has a groomer/bather ever informed you of a previous concern with your dog's behavior when receiving either a haircut or bath (i.e. doesn't like feet touched, sensitive to lifting, needed a muzzle)
 No, you were not notified of any problems.
 Yes Please list: _____

10. Do you ever give your dog these veterinarian approved over-the-counter medications?

Aspirin for stiffness	Yes	No
Immodium for diarrhea	Yes	No
Benedryl for allergies/itching	Yes	No
Pepcid for vomiting	Yes	No
Robitussin DM for coughing	Yes	No

Do we have your permission to give these over-the-counter medications if your pet shows signs of the symptoms mentioned above? Yes No

11. How was your dog obtained? Purchased from breeder Adopted from City Pound
 Adopted from a shelter Given to me from an acquaintance Found as a stray