

Daily Wag II

*1190 Yuma St.
Denver, CO 80204
303-307-1638
info@dailywag.com*

Daily Wag Dog Profile

Name of owner: _____

Name of Dog: _____

Breed: _____ Age: _____ Sex: M / F Spayed/Neutered

Weight: _____ Color: _____ Special Markings: _____

Is your dog house trained? Yes ____ No ____ Is your dog kennel trained? Yes ____ No ____

Do you allow your dog to have treats? Yes ____ No ____

Are there any types of treats you prefer your dog not to have? _____

Please give us full instructions for feeding: _____

Please describe your leashes: _____

Are there any special games your dog enjoys? _____

Does your dog need extra rest periods? _____

Does your dog have any sensitive spots on the body? _____

Has your dog ever bitten or been bitten? Please explain. _____

Is your dog taking any medications at this time? Please explain. _____

Is your dog allergic to anything? _____

Client Signature

Date