

Paws Inn Resort - Sirius Membership Application

We invite you to complete this form to apply to be a Sirius Platinum or Silver Member at Paws Inn Resort. No one knows your dog better than you, so we'd appreciate you taking the time to fill out this form. The more we know about your dog, the better care, activities, and attention we can provide.

Owner's Name(s): _____

Today's Date: _____

Dog's Name: _____

Breed: _____

If a mix, list two predominant breeds in behavior: _____

1a. Current age _____

1b. How long have you lived with your dog? _____

2. Where did you get your dog? Newspaper Ad Breeder Pet Store Animal Shelter
 Animal Rescue Group Friend Found As Stray Other _____

What knowledge do you have of your dog's past history?

3. What benefits do you think your dog could receive from staying at Paws Inn Resort? (check all that apply)

Play with other dogs So not home alone (check if exhibits symptoms of separation anxiety)

Exercise: Primary source or Additional source of exercise

Recommended by other pet professional (trainer, vet, etc.): Reason: _____

Other: _____

4. Which of the following best describes your dog's level socialization with other dogs:

None – No knowledge of other dog interaction

Minimal – On leash encounters only

Moderate – Some off-leash playtime on occasion with visitor's/neighbor's/friend's dog(s)

Extensive – Regular visits to dog social events, off-leash dog parks, dog daycare, etc.

5a. Has your dog had any problems previously in a social environment?

No Yes, (check all that apply)

Altercation or fight at a public dog park

Altercation or fight with a neighbor or friend's dog

Fearful reaction in a group of dogs

Dismissed from a prior dog daycare or social playgroup program (complete item 5b)

Other (please describe) _____

5b. Only complete if you answered yes in 5a that your dog was dismissed from a prior program.

What reason were you given as to why your dog was dismissed?

Check each statement below that applies to the situation that resulted in your dog's dismissal.

- My dog was injured, no medical treatment required
- My dog was injured and required medical treatment
- Another dog was injured, no medical treatment required
- Another dog was injured and required medical treatment
- A person was injured, no medical treatment required
- A person injured and required medical treatment

Provide any other comments you want us to know about this situation.

Health History

6. Does your dog have any allergies? Yes No

If yes, please explain:

7. Does your dog have any physical disabilities? Yes No

Please explain disability & cause:

If answered yes, what restrictions need to be placed on your dog's activities or movements?

No jumping No running No hard play No contact with other dogs Other (Please explain)

8. Does your dog have any medical conditions? Yes No

If medication is used to control the condition, please provide name and dosage.

9. Provide details of your dog's diet –

a. type (kibble, canned, raw/natural): _____

b. brand (Innova, Iams, Purina, etc.): _____

c. primary protein source: _____

d. feeding schedule: _____

10. On what type of surface does your dog generally go to the bathroom (e.g., grass, mulch, pee pads)?

11. Does your dog have any bathroom-related issues or concerns? Yes No

If yes, please explain: _____

12. Where are your dog's favorite petting spots?

13. How frequently is your dog walked outside? _____

13b. How long are your walks? _____

14. Check the box below that best represents your dog's overall level of exercise routine:

Couch Potato: Spends days sleeping, occasional walks and/or playtime with humans or other dogs.

Mild Exerciser: Short daily walks and/or regular playtime with human or other dogs.

Moderate Exerciser: Long or multiple walks daily and/or regular playtime with human or dogs.

Athlete: Regular jogs/runs and/or regular participation in a dog sport activity such as agility, flyball, frisbee, etc.

Household Information

15. What other pets are in your household?

16. How does your dog get along with your other pets?

17. How does your dog react to unfamiliar animals on walks?

18. Does your dog like children? Yes No

19. How does your dog behave around children?

20. Does your dog ever bark or growl at anyone passing outside your home or yard? Yes No

21. Are there any types and/or breeds of dogs your dog seems to automatically fear or dislike? Yes No

If yes, please describe: _____

22. How does your dog react to puppies? _____

23. How does your dog react to another dog approaching him/her in a park, at the beach, or on a walk?

a. On Leash: _____

b. Off Leash: _____

24. Does your dog play with other dogs? Yes No

If yes, which type? Male and females Only males Only females

Please describe size, breed, & temperament of the other dogs.

25. What kinds of games does your dog play with other dogs?

26. What kinds of games does your dog play with people?

27. Has your dog ever shared his/her food or toys with other animals? Yes No

If yes, how does your dog react to another dog approaching his/her food or toys?

28. Which commands does your dog know? (please check all that apply)

Sit Stay Down Come Heel Rollover Kisses High Five

Other: _____

29. How did your dog get his/her obedience training? (Please check all that apply)

Attended one group class

Attended more than one level of group classes (beginner and intermediate, etc.)

Dog was sent to a board and train program

Private sessions in home

Other, please explain:

30. Which of the following best describes the use of obedience cues with your dog at home?

- Key part of daily communication
- Used when we go on walks or have people over
- Used occasionally to better control behavior
- Rarely used
- Not applicable

31. What kind of a collar do you use to walk your dog?

- Buckle
- Nylon/Chain Choke Collar
- Harness – Leash Clips on Back
- Harness – Front Clip
- Head Collar
- Prong/Pinch
- Other:

32. Is it effective in keeping him/her under control? Yes No

33. Has your dog ever gotten away from someone when out for a walk? Yes No

If yes, please explain circumstances:

34a. Where does your dog sleep?

- Inside the house
- Outside the house
- Inside/Outside-varies

34b. If, inside the house, where in the house does your dog sleep?

- Crate
 - Owner's bed
 - Dog Cushion/Bed on floor
 - Other (Please describe)
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35. Has your dog ever jumped up on someone? Yes No

36. What does your dog do to show he/she is happy?

37. What does your dog do to show he/she is upset?

38. Is your dog allowed on the furniture at home? Yes No

39. Does your dog have any problems in any of the following areas? If yes, please explain.

Mouthing: _____

Housetraining: _____

Barking: _____

Digging: _____

Ignoring commands: _____

40. Does your dog know any tricks? Yes No If yes, please describe.

Dog Behavior Information

41. Are there any particular types of people your dog seems to automatically fear or dislike?

42. Has your dog ever growled at someone? Yes No

If yes, what were the circumstances and how did you respond?

43. Has your dog ever bitten a person? Yes No

If yes, what were the circumstances and how did you respond? Please describe injuries (if any).

44. Has your dog ever bitten another animal? Yes No

If yes, what were the circumstances and how did you respond? Please describe any injuries if there were any.

45. To the best of your knowledge, what does your dog do when you're not at home?

46. Has your dog ever climbed/jumped a fence? Yes No

If yes, what were the circumstances? How high was the fence?

47. Has your dog ever escaped from your house or yard? Yes No

If yes, please explain the circumstances:

48. How would you describe the energy level of your dog? Low Medium High

49. Has your dog ever chased or tried to chase a small animal? Yes No

If yes, what were the circumstances?

50. Has your dog ever chased someone (or wanted to) on a skateboard or bicycle? Yes No

If yes, what were the circumstances?

51. Is your dog frightened by thunderstorms? Yes No

If yes, describe typical behavior & what specifically helps to relax your dog or calm his/her fear.

52. Is your dog frightened or nervous around anything else? Yes No

If yes, please explain.

53. Does your dog play with any toys? Yes No

If yes, what kinds of toys does your dog like?

54. Has your dog ever growled or snapped at a person who has taken food or toys away. Yes No

If yes, what were the circumstances and how did you respond?

55. Has your dog ever growled or snapped at another dog who has taken food or toys away? Yes No

If yes, what were the circumstances and how did you respond?

56. Have you ever noticed your dog stopping and staring at another animal? Yes No

57. Other comments or information about your dog that you feel might be helpful?

Scheduling Information

58. How often do you anticipate boarding in the next 12 months?

59. What times of year do you anticipate boarding in the next 12 months? (Example summers, specific holidays, weekends, etc.)

***Thank you for the time you spent completing the application form.
Please contact us if you have any questions on the next steps.***