



From Dusk Till Dog, LLC
Dogs. Science. Passion.

Training Intake Form

Name of pet parent(s):

Full address of parent(s) (street, city, zip): *(you can omit this for virtual sessions)*

Please provide any details to help us ensure we are pulling up to the right home
(color of house, décor out front, etc.): *(you can omit this for virtual sessions)*

If you're in an apartment or condo, please let us know the best place to park:

Contact phone number:

Preferred e-mail:

*For those scheduling virtual sessions, do you want to use Zoom, Skype, or FaceTime?
Please let us know your number or email/username to use for whichever platform
you'd prefer. Please note, we will call you.*

Name of dog(s):

Age:

Breed:

Gender:



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Spayed/Neutered:

How or where did you get your dog? (Please specify rescue/shelter name, private party, or breeder's name.)

How long have you had your dog?

If you rescued your dog, what do you know about his/her history? (For example, was your dog rehomed many times? Was he/she neglected or abused in any way?)

Do you have previous dog experience?

Why did you choose this particular breed?

Why did you choose this particular dog?

Who is your veterinarian?

When was your dog's last veterinary exam and what was the outcome?

Does your dog have any medical conditions, dietary restrictions, or allergies? If so, please list them.

What kind and what brand of food do you feed your dog?



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How often does your dog get fed?

Who usually feeds the dog?

Does your dog usually finish his/her entire meal, every meal?

Is your dog up to date on his/her rabies shot? (If your puppy/dog is of age, please ensure proof of rabies is emailed to us when you email this form.)

How many people live with your dog? Please list their names and list ages of anyone under the age of 18.

Who will be responsible for training the dog?

Do you have any other pets (dogs and cats being most important to note) in your home? If so, what kind, how old are they, and what are their names?

Is your dog uncomfortable when you touch a certain part of his/her body?

Has your dog displayed any fear of anything specific? (For example, vacuum, little children, thunder, etc.) How do they typically react?

Can you take toys, bones, and food away from your dog easily?

Has your dog ever bitten someone/snapped at a person? If so, how severe was it and what generally happened? Please be as specific as possible.



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How does the dog react to someone new coming into the house? (Please be very specific on this. Does your dog charge at people? Is his/her hair standing up? Do they bark aggressively? Do they jump and mouth? If your dog isn't 100% friendly, or you're not sure if they are, when someone is walking into the house, we require your dog is put away or leashed away from the door when we arrive.)

How does your dog react to dogs while he/she is on leash?

What type of equipment do you walk your dog on (harness, head halter, flat collar)?

Have you ever used any of the following equipment on your dog – choke chain, prong collar, shock collar/e-collar, or have an electric fence for your dog? If so, please list all that apply and how much you use/used it.

Has your dog interacted with dogs off leash? How did he/she respond?

How much does your dog get walked for exercise? (Please do not include yard time.)

How long on average are their walks (not including yard time)?

How many hours is your dog home alone on a daily basis?

Where is your dog while you are out of the house?

Is your dog destructive when he/she is bored or when you are not home?



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How do you correct undesired behavior?

How do you reward your dog for desired/good behavior?

What skills do you think your dog already knows? (Sit, down, stay, come, leave it, heel, look, go to place, take it, drop it, off, etc. - Please list all that apply)

What made you seek professional training assistance now?

What behaviors or skills are most important to you for you and your dog to learn during our program?

What motivates your dog? (Treats, toys, praise, petting, playtime, other – Please list all that apply).

Has your dog received any other kind of formal training? If yes, please list where/who, what type of training it was, and how long they attended.

Is there anything else you think we should know before our session?

How did you hear about us? (Online search, rescue organization, veterinarian, pet store, friend? – Please list name of organization, rescue, or person.)



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Client Signature Needed

By signing & emailing this form, client understands and agrees that there is no guarantee of their dog's future behavior. Client agrees that From Dusk Till Dog shall not be liable for any injury or damage to any person, animal, or property, which results from the training and/or behavior of their dog. From Dusk Till Dog shall not be liable for any costs or expenses as a result of their dog's participation in the program. From Dusk Till Dog reserves the right to refuse or terminate training services at any point. Client understands there are no refunds after the start of any training program. Client also agrees to a 48-hour training session cancellation policy. Cancellations occurring with less than 48-hours of scheduled session or clients who cancel on multiple occasions may be subject to a cancellation fee.

By signing/emailing this form, client agrees to allow From Dusk Till Dog to take video footage or pictures during the training sessions and to use the name of the client's dog and any images or likeness of client's dog in any media, illustrations, marketing, advertising, trade, or promotional materials without compensation. Client releases to From Dusk Till Dog all rights that the client may possess or claim to such images, likeness, or recordings.

Client's Electronic Signature (Please type full name & date signed)