



Chino Hills Pet Resort

3417 Chino Ave.

Chino, CA 91710

909-464-9777

www.chinohillspetresort.com

Client Name: _____

Patient: _____

Address: _____

Age: _____

Breed: _____

Phone Number: _____

Sex: _____

Client ID: _____

Color: _____

Email Address: _____

Weight: _____

DAYCARE EVALUATION QUESTIONS

Date: _____

Pet History

How long have you had this pet? _____

How did you obtain your pet? _____

When was your pet altered (spayed or neutered)? _____

Does your pet have any previous medical conditions (canine bloat, thyroid disease, coughing, or diarrhea)?

Does your pet have any allergies? Yes _____ No _____

Does your pet have any physical limitations (arthritis, blind, deaf)? _____

Do you use any flea prevention? Yes _____ No _____

What type? _____ When was it last applied? _____

Does your pet live with another pet (dog or cat) or have they in the past? _____

Do you take your pet to the Dog Park or Dog Beach? If so, how do they interact with other pets?

How does your pet normally react to people they are unfamiliar with?

How does your pet normally react to dogs they are unfamiliar with?

Does your pet ever show aggression when guarding a toy? _____

What type of training or showing experience does your pet have? _____

Has your pet ever bitten another dog or person? Yes _____ No _____

If yes, was medical attention needed? Yes No

Describe circumstances _____

Has your pet ever:	Yes	No
Attended any dog Day Care or Doggie Camp?	<input type="checkbox"/>	<input type="checkbox"/>
Boarded in a facility?	<input type="checkbox"/>	<input type="checkbox"/>
Does your pet jump fences?	<input type="checkbox"/>	<input type="checkbox"/>
Is your pet kennel or crate trained?	<input type="checkbox"/>	<input type="checkbox"/>
Does your dog dig under fences?	<input type="checkbox"/>	<input type="checkbox"/>
Does your dog have experience sharing toys?	<input type="checkbox"/>	<input type="checkbox"/>

For Internal Use Only:

Approved	<input type="checkbox"/>
Not Approved: why?	<input type="checkbox"/>
Name of Attendant	

Comments _____
