

Jo Churlish

ANIMAL BEHAVIOUR & TRAINING

BEHAVIOUR INFORMATION FORM

DETAILS of Adults & Children who live, or interact on a regular basis, with your pet

Title: _____	Forename: _____	Surname: _____
Title: _____	Forename: _____	Surname: _____
Title: _____	Forename: _____	Surname: _____
Title: _____	Forename: _____	Surname: _____

Address: _____

County: _____ Post Code: _____

Tel No: _____ Mobile No: _____

E-mail: _____

PET'S DETAILS

Pet's Name: _____ Breed: _____

D.O.B.	Age:	Sex:	Neutered?	If yes, when?
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How old was your pet when you bought him/her? _____

Where did you get your pet from? _____

Details of previous training: _____

Details of any Behaviour or Training Problems: _____

What food does your pet have? _____

What is his/her favourite food/treat? _____

What games does your pet play? _____

Who does he/she play with? _____

Details of other pets that you have: _____

Who Recommended us ?

<input type="checkbox"/> Vet	<input type="checkbox"/> Yellow Pages	<input type="checkbox"/> Yell.com	<input type="checkbox"/> Thomson Directory
<input type="checkbox"/> APDT	<input type="checkbox"/> Kennel Club	<input type="checkbox"/> Pet Shop	<input type="checkbox"/> Durham K9 Hydro Centre
<input type="checkbox"/> John Rogerson	<input type="checkbox"/> Friend	<input type="checkbox"/> Jo's website	
<input type="checkbox"/> Other (please give details)			

Name of Veterinary Practice: _____

WHEN and WHY did your pet last see the vet? _____

Print name: _____ Signature: _____ Date: _____

Jo Churlish 9 Eldon Close Langley Park Durham DH7 9FR Tel: 0191 3731185 www.jc-pets.com

For Office Use only

Date of Consultation: _____ Time: _____ Venue: _____
Appt with: _____ Payment details: _____ (Cash / Cheque)