



POOCH HOUT BAY

PACK WALK QUESTIONNAIRE & ADMISSIONS

WALKIES

Does your dog walk on or off leash? _____

Would you trust them to walk off-leash without you? _____

How good is your dogs recall out of 5 (1 = non existent 5 = brilliant)? _____

How good is your dogs leash etiquette out of 5 (1 = non existent 5 = brilliant)? _____

Would your dog be suited to adventure walks as part of a pack? _____

How does your dog cope in the car? _____

Does your dogs behaviour change towards other dogs when on leash? _____

Dog Sociability 1=not social to 5= well socialized with all ages, genders, and breeds ____

Human Sociability 1=not social to 5= well socialized with all ages, genders, and races ____

Any other important information to know about your dogs:

Owner Name & Surname : _____

Home Address: _____

Cell No.: _____ Email Add: _____

Alt. Cell No. (if we cannot get hold of you): _____

Vets Name and No.: _____

Pet's details

Name: _____ Breed: _____ Age: _____

Spayd/Neutered: _____ Illnesses or Allergies: _____

Medication and instructions: _____

Feeding instructions: _____

Dog Sociability 1=not social to 5= well socialized with all ages, genders, and breeds ____

Human Sociability 1=not social to 5= well socialized with all ages, genders, and races ____

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POOCH TERMS & CONDITIONS

1. I confirm that I approve of the dog walker provided, I have met and detailed the terms of the services they are required to carry out.
2. Whilst POOCH walkers take every possible precaution to look after all animals and their "belongings" I distinctly understand that they are in no way liable for any damage to or loss of property of any kind, including my own.
3. POOCH is not liable for death or injury to my animal through sickness, accidental escape, or other uncontrollable factors whilst in their care.
4. For the safety and well-being of my dog, I will fully disclose any behavioral issues my dog has prior to the use of POOCH services, such as aggression, resource guarding, food aggression, excessive barking, house training problems, chewing, separation anxiety, and barrier frustration, etc. Should my dog in any way endanger the lives or safety of my POOCH walker I authorize POOCH to make alternative arrangements and will assist in every way possible.
5. POOCH will not be held responsible for any accounts payable accrued through injury or loss as a result of my dog's actions.
6. I agree to provide valid inoculations certificates, (or vet record booklet) namely the 4 in-1 annual vaccination.
7. I authorize POOCH where it is not expedient or practical to contact me to get medical attention for my dog. All costs will be for my account. POOCH will do their utmost to contact me first, however. The choice of Veterinarian will be at the sole discretion of the proprietors of POOCH.
8. I will advise of any health issues and concerns or medication that my pet might have.

Pictures and video updates are included in our pricing, and POOCH undertakes to love and look after your dog to the very best of our ability.

Print name below:

I _____ agree to adhere to the TERMS AND CONDITIONS stipulated above.

SIGNATURE: _____

Date: _____