



Student Profile

Dog's Name: _____ Breed: _____ Male or Female

Current Age: _____ Age when acquired: _____ Acquired from? _____

Spay/Neutered? _____ Does your dog have pre-existing medical conditions/allergies? _____

Owner(s): _____

Address: _____ City: _____ State/Zip: _____

Phone (Home): _____ Phone (Cell or Work?): _____ Email: _____

Veterinarian: _____ Vet's Phone: _____

How did you hear about Bark Tutor? _____

Does your dog attend a dog park? _____

If your dog has had previous training, please list where and when: _____

List 4 behaviors your dog exhibits that you dislike:

1. _____ 2. _____

3. _____ 4. _____

List 4 goals for you and your dog to attain while in school:

1. _____ 2. _____

3. _____ 4. _____

List two of your dog's favorite things (car rides, chicken, kids etc.):

Please list any other animals your dog lives with:

Name						
Age						
Breed						
Sex						
Neutered/Spayed						

For Office Use Only:

Class/Program: _____ **Start Date:** _____ **Vaccination Dates:** _____