



Summit Bridge Veterinary Hospital  
3930 Red Lion Road  
Bear, DE 19701  
302-834-PETS (302-834-7387)

**Summit Bridge Veterinary Hospital, LLC  
DOG PROFILE FORM**

**CLIENT INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**EMERGENCY CONTACT**

**(These are the only people other than the client who are authorized to pick up the dog or provide consent for treatment.)**

1. Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**PET INFORMATION**

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Weight: \_\_\_\_\_ Color: \_\_\_\_\_ Age/ Birthdate: \_\_\_\_\_

Male or female? \_\_\_\_\_ Spayed/ Neutered or Unaltered? \_\_\_\_\_

Has this dog ever been to a boarding facility? \_\_\_\_\_ Has this dog ever been to a dog day care? \_\_\_\_\_

Does this dog know and follow basic commands? \_\_\_\_\_ Is this dog housebroken? \_\_\_\_\_

Do you have other pets at home? What kind of pets and how old are they? \_\_\_\_\_  
\_\_\_\_\_

Does this dog visit the dog park and play well with other dogs? If no, please explain. \_\_\_\_\_  
\_\_\_\_\_

Which phrases best describe your dog's characteristics and personality? Circle ALL phrases that apply.

- |                                   |  |                          |                                     |  |                           |
|-----------------------------------|--|--------------------------|-------------------------------------|--|---------------------------|
| -intelligent and serious          | -inquisitive and independent             | -active and alert        | -feisty and fun                     | -strong and smart                              | -gentle and slow          |
| -territorial of things and people | -not territorial                         | -likes to retrieve toys  | -speedy and agile                   | -may be territorial depending on the situation | -affectionate             |
| -like to herd and may bump/nip    | -like to use smell/vision to find things | -likes to be in water    | -barks at anyone or anything        | -likes to guard                                | -protective of other dogs |
| -very athletic                    | -tough but slow                          | -likes to be entertained | -likes to dig                       | -likes to chase smaller dogs                   | -friendly                 |
| -easy to train                    | -can be trained but must want it         | -likes to be walked      | -likes to dig                       | -easily trained                                | -obedient                 |
| -likes people companionship       | -will run away if not on a leash         | -outgoing                | -treats everything as if it is play | -can be friendly depending on the situation    | -submissive               |
| -follows commands                 | -likes to mount other dogs               | -howls                   | -climbs fences                      | -may be aggressive in situations               | -clingy                   |
| -marks territory                  |  | -likes to chew           | -treat/food aggressive              | -may bite depending on the situation           | -reserved                 |
|                                   |  | -eats feces (poop)       |                                     |  | -low activity level       |
|                                   |  |                          |                                     |  | -has separation anxiety   |

In what situations does your dog become unfriendly? Circle all that apply.

- |                          |                            |                         |                       |                               |                             |
|--------------------------|----------------------------|-------------------------|-----------------------|-------------------------------|-----------------------------|
| -meeting other dogs      | -grabbing collar           | -meeting new people     | -being groomed        | -being touched while sleeping | -being touched on face/ears |
| -being touched on paws   | -being touched on back     | -being touched on tail  | -when around children | -when around men              | -when around women          |
| -when food is taken away | -when treats are given out | -when toy is taken away | -Other:               |                               |                             |

Has this dog ever displayed any of the following reactions with dogs or people? Circle all that apply.

- |          |                                  |             |                          |              |                         |
|----------|----------------------------------|-------------|--------------------------|--------------|-------------------------|
| -bites   | -teeth on skin but no bite marks | -growls     | -snaps but does not bite | -shows teeth | -trembles               |
| -freezes |                                  | -moves away |                          | -hides       | -won't make eye contact |

Who does your dog play best with? Circle all that apply.

- |                                    |                 |                  |                  |                  |                   |
|------------------------------------|-----------------|------------------|------------------|------------------|-------------------|
| Does not play well with other dogs | Big, rough dogs | Big, clumsy dogs | Little fast dogs | Little slow dogs | Senior, slow dogs |
|------------------------------------|-----------------|------------------|------------------|------------------|-------------------|

**VACCINATION RECORDS**

**If your dog is a patient of Summit Bridge Veterinary Hospital, vaccination records are on file. If your dog is not a patient or has never been seen by our veterinarians, please fill in the information below.**

**List current expiration dates for all vaccinations.**

Name of Veterinary Clinic: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Primary Veterinarian: \_\_\_\_\_

Rabies: \_\_\_\_\_ DHPP: \_\_\_\_\_

Bordetella: \_\_\_\_\_ CIV: \_\_\_\_\_

Lepto: \_\_\_\_\_ Lyme: \_\_\_\_\_

All dogs boarding or using the dog day care must use a flea/tick preventative.

Is your dog on a flea/tick preventative?      Yes      No

Name of flea/tick preventative used: \_\_\_\_\_

Date it was last given : \_\_\_\_\_

All dogs must be spayed or neutered , unless approved by our veterinarian

**I, the undersigned, do hereby acknowledge and agree that the information in this application is complete and accurate to the best of my knowledge. I attest that my signature, if I am not the sole owner of this dog, is insufficient to enter into the application for and on behalf of any other owner.**

Signature of Owner:

\_\_\_\_\_

Date: \_\_\_\_\_