



## CLIENT PROFILE

*(This document can be filled in using Microsoft Word or printed and hand written)*

917.847.6224  
Tribeca Pet Services  
www.tribecapet.com

### CLIENT

Full name: \_\_\_\_\_

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

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

How were you referred? \_\_\_\_\_

*Extra comments:* \_\_\_\_\_

### EMERGENCY

Name of contact \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

*Extra comments:* \_\_\_\_\_

### TRAVEL SCHEDULE

Where can you be reached while away? \_\_\_\_\_

Date & time leaving: \_\_\_\_\_ Time: \_\_\_\_\_

Date & time returning: \_\_\_\_\_ Time: \_\_\_\_\_

Would you like email updates? \_\_\_\_\_



	Any medical or behavior concerns? Problems?		Any medical or behavior concerns? Problems?	
	Extra Comments		Extra Comments	
VETERINARY	Primary Vet			
	Address			
	Phone Numbers			
	Emergency Hospital			
	Address			
	Phone Number			

**History/Background**

How long have you lived with your canine companion? Where did you get your canine companion?

What do you know about your companion's history?

Where does your companion typically sleep?

Does your companion use a crate?

Does your companion have a tendency to bark at people, other pets, etc.?

Has your companion ever growled at you?

Can you take food, toys or stolen goodies away from your companion?

Is there any situation or body area where you cannot touch your companion?

Describe your companion's interactions with other pets (dogs, cats, etc):

Does your companion go to off leash parks or trails?

Does your companion go to a doggy daycare? Do you have a dog walker? Does your companion regularly go on group dog walks?

Has your companion been boarded before? Was it home based? A kennel? At your vet? A Social Boarding Center?

Are there any people your companion is uncomfortable around?

What kind of physical exercise does your companion get? How much and how often?

Is your companion allergic to anything?

Does your companion have any injuries or physical concerns we should be aware of?

Anything else you would like us to know?

Thank you for taking the time to fill out this form. In doing so it will allow us to better serve you and the needs of your companion.