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| **Section 1 - About You** |   |
| Date(s) Dog Walking Service is required |  |
| First Name  |   |
| Last Name |   |
| Address  |   |
| Post Code |   |
| Contact Telephone Number |   |
| Email Address |   |

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| **Section 2 - About Your Dog**  |   |
| Name  |   |
| Age  |   |
| Male / Female  |   |
| Neutered / Spayed  |   |
| Breed  |   |
| Description |   |
| Mircochipped |   |
| Microchip number |   |
| Date of last vaccination |   |
| Will your dog need any medication administered |   |
| Please give full details of the medication required, and provide instructions on how to administer  |   |
| Location of lead or harness and any special fitting instructions |   |
| Does your dog walk off lead |   |
| Please detail any behaviour issues either with other dogs, animals or people which we should be aware of while walking |   |
| **Section 3 – About Your Property** |   |
| Will someone be home to grant access to the property |   |
| Will you be happy to sign over keys |   |
| Can keys be left with a neighbour |   |
| ***Note: Instructions for entering property and details of any additional security measures such as alarms will be discussed in person - These details will be stored safely and with no link to you or your home*** |   |

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| **Section 4 - In case of Emergency**  |   |
| Location of Gas shut off switch  |   |
| Location of water shut off switch |   |
| Location of circuit breaker |   |
| Name and address of vet |   |
| Emergency contact name and phone number |   |

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| **Section 5 - Additional Information** |   |
| Please provide details of any extra information which may be useful to us while your dog is in our care  |   |