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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 |  |