



# Pet Guardianship Program Dog Enrollment Form

Thank you for taking the responsible step to enroll your beloved pet in Yavapai Humane Society's Pet Guardianship Program. Dogs can't talk, so they can't tell us where or with whom they would like to live. To ensure that their home is a safe, happy & appropriate place for your dog to live, we need you to fill out this form in as much detail as possible. Detail & honest information from you is crucial to our placement process, so please take the time to fill in this profile with care & accuracy.

Undesirable behaviors & medical issues do not necessarily create problems, however, not disclosing those problems definitely does. Inaccurate or incomplete responses can undermine the safety & happiness of both your dog & the new adopting family. If there are any questions that are unclear or that you are uncomfortable responding to for any reason, please ask to speak directly to one of our helpful staff about the issue.

Your Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

## General Information

Dog's Name: \_\_\_\_\_ Vaccinated within the past year? \_\_\_\_\_  
Age: \_\_\_\_\_ Which veterinary facility? \_\_\_\_\_  
Breed: \_\_\_\_\_ Sex: Male / Female Is your dog spayed/neutered? \_\_\_\_\_  
How long have you owned this dog? \_\_\_\_\_

### 1. Where did you obtain this dog?

- This Facility       Other Shelter       Breeder       Pet Store  
 Friend       Found       Rescue Group       Newspaper  
 Other: \_\_\_\_\_

2. To your knowledge, how many homes has this dog had before living with you? \_\_\_\_\_

3. Please list the ages and sexes of the people this dog has lived with: \_\_\_\_\_  
\_\_\_\_\_

### 4. Would you recommend placing this dog in a home with children under 10 years of age?

Yes \_\_\_\_\_ No \_\_\_\_\_ Not sure \_\_\_\_\_

Why or why not? \_\_\_\_\_  
\_\_\_\_\_



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If this dog lived with children under 8 years of age, how did they interact? (Check all that apply):

- Dog actively avoided children       Dog growled at child       Child could pet the dog  
 Ignored each other       Played together       Gentle/Affectionate  
 Jumps on/knock over       Unknown       Other: \_\_\_\_\_

5. Please tell us what other animals your dog has lived with (**check all that apply**):

- Male Dog(s) Un-Neutered #\_\_\_\_       Female Dog(s) Un-Spayed #\_\_\_\_  
 Male Dog(s) Neutered #\_\_\_\_       Female Dog(s) Spayed #\_\_\_\_  
 Other \_\_\_\_\_       Never lived with other animals  Cats #\_\_\_\_

6. What has been your dogs experience with other dogs in your home or outside of your home?

- Bullies       Frightened Of       Friendly/Playful       Never around other dogs  
 Growls/Snaps       Shy       Curious       Unknown  
 Lunges on leash       Ignores       Other: \_\_\_\_\_

Would you recommend placing this dog in a home with other dogs?

Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_ Why or why not? \_\_\_\_\_

7. How does you dog interact with cats? (**Check all that apply**):

- Chases       Curious       Friendly       Never around cats  
 Barks/lunges at       Ignores       Gentle       Unknown  
 Has injured/killed       Frightened of       Other: \_\_\_\_\_

Would You Recommend Placing This Dog In A Home With Cats?

Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_ Why or why not? \_\_\_\_\_

8. How often does your dog go to the bathroom inside your home? (**check all that apply**):

- Every day       Once a month       Only when a puppy       When yelled at  
 If left to long (how long?)\_\_\_\_\_       Only when not home       Marks inside  
 Never had inside accident       Goes while crated  
 Other: \_\_\_\_\_

Does your dog ask to be let outside to go to the bathroom? \_\_\_\_\_

How? \_\_\_\_\_

9. Is your dog crate/kennel trained?       Yes       No

What does your dog do while crated? \_\_\_\_\_

10. If your dog chews, what does he/she like to chew on? (**check all that apply**):

- Chews furniture       Chews socks/clothing       Only chews toys       Doesn't chew at all  
 Chews at fences       Chews when not home       Chews rawhide/bones  
 Chews at doorways/windows       Steals items, then chews them  
 Other \_\_\_\_\_



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What does your dog do when you try to take an item away? \_\_\_\_\_

11. Where is your dog kept when you're home? **(check all that apply):**

- Always outside
- Sometimes outside
- Crate/Kennel
- Loose in the house
- In garage
- Confined to a room (what room) \_\_\_\_\_
- Kept chained outside
- In basement
- Other: \_\_\_\_\_

12. Where is your dog kept when you're not home? **(check all that apply):**

- Always Outside
- Sometimes Outside
- Crate/Kennel
- Loose In The House
- In Garage
- Confined To A Room (what room) \_\_\_\_\_
- Kept Chained Outside
- In Basement
- Other: \_\_\_\_\_

13. How many hours a day is your dog left alone?

- More Than 10 hours
- 8-10 hours
- 5-8 hours
- 0-4 hours
- Never left alone
- Other: \_\_\_\_\_

14. How do you confine your dog to your yard? **(check all that apply):**

- None dog runs free
- Partial fence
- Complete fence
- Stockade/privacy fence
- Chained to dog house
- 6 Foot
- 5 Foot
- 4 Foot
- Other: \_\_\_\_\_

15. Has your dog ever escaped? if so how? **(check all that apply):**

- Climbs the fence
- Runs away if off leash
- Does not escape or run away
- Opens latch
- Runs but comes when called
- Digs under/chews through fence
- Jumps over
- Other: \_\_\_\_\_

16. What type of training has your dog had?

- Group obedience classes
- Professional/Private sessions
- Where? \_\_\_\_\_ With whom? \_\_\_\_\_
- How many? \_\_\_\_\_
- Never attended any obedience classes
- Trained in home
- Other: \_\_\_\_\_

What commands does your dog respond to? **(Check all that apply):**

- Fetch
- Sit
- Stay
- Paw/Shake
- Down
- Heel
- All
- Others: \_\_\_\_\_

17. Are there any particular people or things that your dog appears to be afraid of? **(check all that apply):**

- Men
- Dogs
- Cars/Truck
- Strangers
- Loud noises
- Children
- Women
- Cats
- Water
- Thunderstorms
- Vacuums/Brooms
- People in uniform
- Other: \_\_\_\_\_

What does your dog do that leads you to believe he/she is afraid? \_\_\_\_\_

18. What circumstances or situations should be avoided that may cause your dog to growl or behave otherwise aggressively? \_\_\_\_\_



19. Has your dog ever (**check all that apply**):

- Bitten       Snapped       Growled       Snarled       Other: \_\_\_\_\_

Was it at or over (**check all that apply**):

- Food       Rawhide       Toys       Strangers       Children       Adults  
 Other Animals       Other: \_\_\_\_\_

20. Does your dog have any current, previous or recurring medical or behavioral problems? (**please describe in detail**): \_\_\_\_\_  
\_\_\_\_\_

Is your dog currently on any medication? \_\_\_\_\_ What medication? \_\_\_\_\_

21. How does your dog react while at the vets office? (**check all that apply**):

- Growls       Cowers/Fearful       Tries to escape       Happy/playful  
 Snaps at vet       Needs muzzle       Passive/doesn't care       Tolerates  
 Other: \_\_\_\_\_

What part of your dogs body does he/she not like touched? (**check all that apply**):

- Feet       Back       Legs       Head       Tail       Mouth  
 Belly       Other: \_\_\_\_\_

How does he/she respond? (**check all that apply**):

- Snaps       Growls       Lunges       Urinates/defecates  
 Struggles/attempts to escape       Cowers       Other: \_\_\_\_\_

What is the name of your veterinarian/veterinary clinic? \_\_\_\_\_

What brand and type of food have you been feeding your dog? \_\_\_\_\_



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## Pet Guardianship Program Dog Enrollment Form

**I certify I have the authority to enroll the above described animal in the Pet Guardianship Program. Upon my death or incapacitation, I hereby relinquish all rights of ownership, in the above-described animal(s) in favor of Yavapai Humane Society, and I agree that the animal(s) may be placed up for adoption, transferred to another animal welfare organization or humanely euthanized at the sole discretion of Yavapai Humane Society.**

**I authorize the transfer of my animal's information (as listed above) to a new owner when this animal is placed up for adoption. The information on this form is to the best of my knowledge, accurate & complete.**

**I understand that every effort will be made to place the animal in a foster home while it awaits adoption, but it may be housed temporarily in the YHS Adoption Center.**

**I understand that YHS will attempt to place my animals in the same home but also understand the most important thing is to have them in a loving home, even if it means they are separated.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

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## Pet Guardianship Program Dog Enrollment Form

### MEDICAL RECORDS RELEASE AUTHORIZATION

Pet Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Animal Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

I have released my animal to Yavapai Humane Society.

**I authorize** \_\_\_\_\_

(name of veterinary practice or veterinarian)

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

to release all medical records to the staff of Yavapai Humane Society, and to the new owner's veterinarian.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### Yavapai Humane Society Use Only:

New Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Send Records To: \_\_\_\_\_  
(veterinary practice)

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

**Yavapai Humane Society (928) 445-2666**