**Step 1: Please complete this form. INCLUDE PHOTO. INCLUDE MEDICAL DOCUMENTS.**

**Step 2: Email the completed form and photo to** **calgarydinorescue@gmail.com**

**NOTE: One Form per dog (however, a litter of puppies may be submitted on one form).**

**INCOMPETE FORMS WILL NOT BE ACCEPTED**

**FULL NAME OF SENDING SHELTER:**

**FULL ADDRESS OF SENDING SHELTER:**

**SHELTER REPRESENTATIVE’S NAME:**

**Email: Cell: Home: Work: Other:**

**TOTAL FEE REQUIRED FROM DINO (Please itemize your Total) Total: $ **

**Medical - $ Transport - $ Crate - $ Other - $**

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**DOG’S NAME:**

**SEX : Female – spayed Female – not spayed Male - neutered Male – not neutered**

**BREED (best guess):**

**DESCRIPTION/ COLOR:**

**AGE OR DATE OF BIRTH:**

**WEIGHT: HEIGHT AT SHOULDER:**

**HOW LONG HAVE YOU HAD THIS DOG: WHERE DID YOU GET THIS DOG (ex. stray, other):**

**FOR PUPPIES: Total Number in litter: No. males: No. females:**

**Date of birth (ex. July 7, 2013):**

**Breed of Father:**

**Breed of Mother:**

**De-wormed:** Yes No Date(s):

**Vaccinated:** Yes No Date(s):

**PERSONALITY AND TEMPERAMENT INFORMATION**

**Ever bitten anyone:** Yes No Unknown Comments:

**Toy or food aggressive:** Yes No Unknown Comments:

**Any other behavioural or personality issues:**

**Any Fears (ex. thunder, car rides, the vet, people in hats, loud noises, etc.):**

**Dog currently lives:** Inside Outside Both

**Sleeps in the house:** Yes No Unknown Comments: **Sleeps on the bed or furniture:** Yes No Unknown Comments: **Relaxed in the house:** Yes No Unknown Comments:

**Flight risk:** Yes No Unknown Comments:

* **Escapes yards:** Yes No Unknown Comments
* **Jumps over fences:** Yes No Unknown Comments:
* **Digs under fences:** Yes No Unknown Comments:
* **Other:**

**Separation Anxiety When left Alone:** Yes No Unknown Comments:

* **Barks, Whines or howls:** Yes No Unknown Comments:
* **Destroys things:** Yes No Unknown Comments:
* **Other:**

**Children:**

* **Has the dog been around Children?** Yes No Unknown Comments:
* **Good with Children?** Yes No Unknown Comments:
* **Likes Children?:** Yes No Unknown Comments:
* **Describe the reaction to children (ex. barks, happy, loves children, growls):**

**Adults:**

* **Has the dog been around People / Strangers?** Yes No Unknown Comments:
* **Good with People / Strangers?** Yes No Unknown Comments:
* **Describe the reaction to People / Strangers (ex. barks, happy, loves children, growls):**

**Other Dogs:**

* **Has the dog been around other Dogs?** Yes No Unknown Comments:
* **Good with other Dogs?** Yes No Unknown Comments:
* **Likes other Dogs?:** Yes No Unknown Comments:
* **Describe the reaction to other Dogs (ex. barks, happy, loves children, growls):**

**Cats:**

* **Has the dog been around Cats?** Yes No Unknown Comments:
* **Good with Cats?** Yes No Unknown Comments:
* **Likes Cats**? Yes No Unknown Comments:
* **Describe the reaction to Cats (ex. barks, happy, loves children, growls):**

**Other Animals:**

* **Has the dog been around Animals?** Yes No Unknown Comments:
* **Good with other Animals?** Yes No Unknown Comments:
* **Describe the reaction to other Animals (ex. barks, happy, loves children, growls):**

**Plays with toys:** Yes No Unknown Comments: **Rides well in a vehicle:** Yes No Unknown Comments:

**Generally describe the dog’s Nature (ex .friendly, outgoing, playful, happy, smart, etc.):**

**Please describe any unique personality trait(s) of the dog:**

**TRAINING**

**House trained:** Yes No Unknown Comments:

**Leash trained:** Yes No Unknown Comments:

**Formal training (ex. obedience, etc.)** Yes No Unknown Comments:

**How was the dog trained (ex. with treats and / or positive motivation, with verbal praise):**

**Crate trained:** Yes No Unknown Comments:

**Comfortable & relaxed in a dog crate:**  Yes No Unknown Comments:

**How much time did the dog spend in a crate daily?**

**MEDICAL INFORMATION**

**Does the dog have a primary care vet:** Yes No Unknown Comments:

**Name of vet or clinic:**

**Address / Location:**

**Phone Number:**

**Medical Records Provided:** Yes No

**Is the dog on heartworm preventative meds:** Yes No Date(s):

**Tested for Heartworm:** Yes No Date(s): Positive Negative

**Tested for Parvo:** Yes No Date(s): Positive Negative

**Current on annual vaccines:** Yes No Date(s):

**Current on rabies vaccine:** Yes No Date(s):

**Current on kennel cough vaccine:** Yes No Date(s):

**Current on flea preventative:** Yes No Date(s):

**Does the dog have rabies identification tags:** Yes No Date(s):

**Any food allergies (specify):** Yes No Unknown Comments:

**Describe any medical conditions:**

**MISCELLANEOUS**

**Anything else DINO Rescue should know:**

**Describe the ideal home for the dog:**

**By signing here, I am attesting to the truthfulness of my answers:**

**Shelter Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2016**

**DINO Representative Approving this Intake: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2016**