

DATE completed:

**Wilson's Walkies & Pet Services-Dog Walking Booking Form**

**Name of owner/s:** \_\_\_\_\_  
\_\_\_\_\_

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

**Emergency Phone Number**  
: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Breed:** \_\_\_\_\_

**DoB:** \_\_\_\_\_

Chipped Y/N  
Y/N

Insured Y/N:

Spayed/Neutered

**Health Information**

Vet Practice  
details: \_\_\_\_\_  
\_\_\_\_\_

Any health concerns.medical conditions/medications/allergies  
etc: \_\_\_\_\_  
\_\_\_\_\_

**Travelling to and from home:**

Is your dog used to being transported in car/van? Y/N

Is your dog happy to be transported in a crate for their safety?

How does your dog behave when in transit? (bark,cry,sickness,settle  
easily

etc): \_\_\_\_\_  
\_\_\_\_\_

**On walks:**

Are you happy to use our leads: Y/N

DATE completed:

Does your dog have their own harness/collar/lead (please circle if correct)

Does your dog pull on the lead: Y/N

\_\_\_\_\_

**Do we have permission for your dog to be off lead during the walk:  
Y/N other**

\_\_\_\_\_

\_\_\_\_\_

Does your dog have good recall and what commands are they used to?: \_\_\_\_\_

\_\_\_\_\_

What activities does your dog enjoy?(sniffing,jumping,toys,tricks etc): \_\_\_\_\_

\_\_\_\_\_

Is there anything which may make them nervous/aggressive/run away etc (reactive to other breeds/soze of dogs etc): \_\_\_\_\_

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Are they reactive to horses Y/N other animals(sheep/cows etc) Y/N or traffic Y/N

Does your dog like to go in water Y/N Can they swim Y/N

Is your dog allowed treats from us? Y/N

**Back home:**

I will do my best to clean the dog/s after their walks but due to resources and time, I will be unable to give them a bath/shower etc. Where should I leave your dogs at home if they have enjoyed a muddier walk?: \_\_\_\_\_

\_\_\_\_\_

AOB:

DATE completed:

Thank you,

