

REACTIVE DOG CLASS QUESTIONNAIRE

Please fill out and email to woof@LuckyDogSportsClub.com or
drop off or mail to Lucky Dog Sports Club
300 S. Central Blvd., Suite B, Jupiter, FL 33458

Instructor: Lisa Radosta DVM, DACVB, Florida Veterinary Behavior Service,
www.flvetbehavior.com

Owner name: _____ Pet's Name: _____

Breed: _____ DOB: _____ Sex: ()M ()F Neutered/Spayed _____

Please list the stimuli that your dog is reactive to:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Please describe briefly, your dog's reaction to the stimuli listed above.

Has your dog ever bitten a person including yourself? () Yes () No
If so, please describe.

Has your dog ever bitten another dog? () Yes () No
If so, please describe.

What do you hope to achieve from this class and what is the behavior problem you want to most correct?