

## Owner Consent & Doggy Form

Contact Details	Owner	Vet
Name		
Address		
Postcode		
Telephone		
e-mail		

Canine Information						
Name						
Breed						
Colour/coat						
Gender	Male		Female		Neutered	Y / N
Date of birth (estimated year)						
Owned since (year/age) <i>if rescue please give as much details as possible</i>						
Clinical diagnosis (if any)						
Prior trauma/surgery/incidents						
Please list any medications and/or supplements your dog is taking						
Vet consent given	Y/N					

# Owner Consent & Doggy Form



Supplementary Information	
What activities do you participate in?	
Games/activities played at home?	
% lead walks vs free running	
Daily exercise routine?	
How many minutes on average does your dog exercise each day?	
Harness/collar/head collar	
Multi-dog household?	
Any character changes?	
Floor surfaces at home/doggy day care?	
Where does your dog go in the house? If allowed upstairs – how many times a day does he/she go up and down the stairs?	
Where/how does your dog sleep?	

Owner's desired outcomes/goals/expectation	
1	
2	
3	

## Owner Consent & Doggy Form

### Owner's desired outcomes/goals/expectation

--	--

### I want to try Canine Myotherapy because:

My dog has an underlying condition: Y/N	My dog had, or is going to have an operation: Y/N	My dog is recovering from an injury: Y/N
My dog is healthy and I want to improve/maintain that: Y/N	My dog is a sporting/performance dog and I feel this treatment would be beneficial: Y/N	Other:

### Which conditions does your dog have?

Osteoarthritis	Hip Dysplasia	Elbow Dysplasia
Lumbosacral Disease	Cruciate Ligament Disease/Injury	Luxating Patella
Shoulder OCD	Intervertebral Disc Disease (IVDD)	Degenerative Myelopathy
None – my dog is healthy:	Other:	

### Anything Else:

I am happy for Puddlehill Pawsitive Therapy to use any photos or videos of my dog taking during the consultation and treatment for (choose all that apply):

- purely for treatment purposes: Y/N
- internal training purposes (other myotherapists): Y/N
- for Puddlehill Pawsitive Therapy Website: Y/N
- for Puddlehill Pawsitive Therapy social media: Y/N
- for external training purposes (workshop/presentations delivery): Y/N

## Owner Consent & Doggy Form



### Owner Declaration & Consent:

I agree to Puddlehill Pawsitive Therapy's Terms & Business as per <https://www.puddlehillpawsitivetherapy.com/terms-of-business>

I confirm that I am the legal owner of the above mentioned dog

I confirm that all the information provided on this form is correct to the best of my knowledge

I agree to Puddlehill Pawsitive Therapy handling my data in accordance with the privacy policy <https://www.puddlehillpawsitivetherapy.com/privacy-policy>

**Signature:**

**Date:**