



Free Play Assessment

Dog Name: _____ Last Name: _____ Breed: _____ Age: _____

Long term goals: Frequent daycare | Occasional daycare | Frequent boarding | Occasional boarding

Is your dog prone to escape artist behaviour? ie: climbing fences, door crashing No | Yes

Have you and your dog been to training? No | Yes, Please describe training method: _____

Do you and your dog go to off leash parks? No | Yes

Please check the type(s) of interactions that apply in settings with other dogs:

- | | |
|---|--|
| <input type="checkbox"/> Charges in to greet dogs, plays with everyone | <input type="checkbox"/> Plays with some dogs |
| <input type="checkbox"/> Charges in to greet dogs but spends most of their time by themself | <input type="checkbox"/> Plays with toys with or around other dogs |
| <input type="checkbox"/> Has had altercations but never done damage | <input type="checkbox"/> Doesn't interact with other dogs |

Is your dog prone to? Leash Aggression | Resource Guarding | Fearful | Separation Anxiety | Fence Jumping

Has your dog ever bitten to harm another dog? No | Yes with Details: _____

Has your dog ever bitten to harm a person? No | Yes with Details: _____

Has your dog ever been crated either at home or at a facility? No | Yes

- Please note Chasin' Tails introduces dogs to the group on leash & subsequent leash work in the group is performed.
- If the dog is not approved for free play, they will be transferred to a private kennel. Owner will be contacted
- Minor wounds are a possibility. The dogs are always carefully supervised and our staff do their utmost to keep them safe.
- Chasin' Tails offers a free assessment. Charge applies to clients outside of Calgary. This assessment is designed to appropriately set your dog up with the best program Chasin' Tails has to offer. With the multiple programs Chasin' Tails will assess your dogs play style and comfortability in play groups. Every dog is different, some prefer one on one dog play and some love to just hang around and socialize. At the end of the assessment a K9 Coordinator will review the assessment with you and set your dog up with the right program.

Initial

Staff section:

Date: _____ Start Time: _____ Canine Coordinator on Shift: _____

Dog is approved for:

- Free play daycare
- Free play boarding
- Day training
- Needs Private accommodation assessment
- Not approved for facility

Passes with Special Considerations:

- | | |
|---|---|
| <input type="checkbox"/> Board in private accommodations for long weekends and holidays | <input type="checkbox"/> Assessment Extension |
| <input type="checkbox"/> Recommend boarding enrichment add-on | <input type="checkbox"/> Needs more daycare before boarding |
| <input type="checkbox"/> Structure | <input type="checkbox"/> Caution band required |

Assessment Completed by: _____ Sign off: _____

G–Green light (happy, no concern) Y–Yellow light (nervous or sensitive) R–Red light (warning signs or concerns)

Staff	Environment	Leash on and off	Praise
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Notes: _____

Individual Introductions

Fence meet	Approaches Fence: Quickly Slowly Didn't Head on Sideways		
Calm Dog	Excited Dog	Multiple Dogs	How many?

Notes: _____

Introduction to group:

Behavior & Body Language Indications																
Body			Spine		Mouth		Ears			Tail			Head			
Forward	Normal	Back	Straight	Hunched	Open	Closed	Up	Back	Forward	Low	Med	High	Low	Med	High	
Stalking			Frothing		Bite		Tight mouth			Looking away			Panting			
Excited play			Freezing		Mounting		Mouthing			Long handshake			Hard eye			
Pacing			Hackles up		Shaking		Growling			Chasing			Whale eye			
Fast moving			Jumping up		Lip licking		Attention seeking			Playing Keep Away			Drooling			
Slow moving			Avoiding dogs		Air snap		Tail tucked			Appeasement smile			Baring teeth			
Stiff body			Avoiding staff		Lip Lift		T-ing			Appropriate greet			Lying / Sitting			
Relaxed mouth			Watching		Walking away		Shake off			Appropriate play			Soft eyes			
Yawning			Check in		Follow staff		Loose body			Smelling ground/dogs			Air scenting			

Notes: _____

Does the dog come to name? No | Yes

Does the dog take breaks? Often | With guidance | Never

How did dog do on kennel rest/How long were they in the kennel? (Green/Yellow/Red)

Notes: _____

Second Half:

Behavior & Body Language Indications																
Body			Spine		Mouth		Ears			Tail			Head			
Forward	Normal	Back	Straight	Hunched	Open	Closed	Up	Back	Forward	Low	Med	High	Low	Med	High	
Stalking			Frothing		Bite		Tight mouth			Looking away			Panting			
Excited play			Freezing		Mounting		Mouthing			Long handshake			Hard eye			
Pacing			Hackles up		Shaking		Growling			Chasing			Whale eye			
Fast moving			Jumping up		Lip licking		Attention seeking			Playing Keep Away			Drooling			
Slow moving			Avoiding dogs		Air snap		Tail tucked			Appeasement smile			Baring teeth			
Stiff body			Avoiding staff		Lip Lift		T-ing			Appropriate greet			Lying / Sitting			
Relaxed mouth			Watching		Walking away		Shake off			Appropriate play			Soft eyes			
Yawning			Check in		Follow staff		Loose body			Smelling ground/dogs			Air scenting			

Notes: _____