

# Berger Picard Club of America Rescue Surrender Questionnaire



## Giving the Berger Picard a second chance

Berger Picards are very special to all of us who work to make sure they have good lives. We commit to do everything we can in order to ensure your dog will find the best forever home that fits your dog's specific needs. You can help us make this process easier by giving us as much information as possible on what your dog likes and dislikes. Please do not hesitate to share any detail that might help your dog adapt to his/her new home. We will do follow ups with the new family to make sure your dog adjusts well to his/her new home, and we will provide guidance to the new owner(s). It is important to list a phone number you can be reached at. In the case of a pure bred dog we would ask that you prepare the registration papers to be signed over to the new owner(s). Thank you for honestly and completely filling out the following questionnaire. You may remit the form to the email address below.

Please note: The Berger Picard Club of America Rescue is an adoption agency. Should you wish to sell your dog, we suggest you advertise through other channels.

Thank you.  
Sincerely,  
The Berger Picard Rescue Team  
[bpca.rescue@gmail.com](mailto:bpca.rescue@gmail.com)

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The Berger Picard of America Rescue Program Email: [bpca.rescue@gmail.com](mailto:bpca.rescue@gmail.com)

# Berger Picard Club of America

## Surrender Questionnaire



Please fill out this form honestly and completely in order to help your dog adapt to his/her new home and return to the Berger Picard of America Rescue email at: [bpca.rescue@gmail.com](mailto:bpca.rescue@gmail.com). Remember it is important to have a phone number you may be reached at. Thank you.

### Owner Information

Name: \_\_\_\_\_

Day Phone Number: \_\_\_\_\_

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

Evening Phone Number: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Best time to call? \_\_\_\_\_

Co-owner name(s) if applicable: \_\_\_\_\_

Note: you must provide a written and signed release for each co-owner if applicable

### Dog Information

Registered Name if known: \_\_\_\_\_

Age: \_\_\_\_\_

Call Name/Nickname: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Sex: \_\_\_\_\_ Spayed/Neutered? \_\_\_\_\_ Weight: \_\_\_\_\_

How long have you owned your dog? \_\_\_\_\_

Was your dog bought from a breeder?  Yes  No

If yes, give name: \_\_\_\_\_

Have you notified the breeder about the need to find a new home?  Yes  No

What was the breeder's response? \_\_\_\_\_

\_\_\_\_\_

Was your dog bought from a pet store or shelter?  Yes  No

If yes, give name: \_\_\_\_\_

Did shelter request that your dog be returned to them?  Yes  No

Has your dog participated in any training classes? \_\_\_\_\_

If yes, which ones: \_\_\_\_\_

What type of training method(s) is your dog familiar with? (clicker, treats, corrections, etc) \_\_\_\_\_

What behaviors or commands, words, tricks, skills does your dog already know? \_\_\_\_\_

\_\_\_\_\_

Is your dog House broken? \_\_\_Yes \_\_\_No Paper trained? \_\_\_Yes \_\_\_No

Crate trained? \_\_\_Yes \_\_\_No Other (Please specify) \_\_\_\_\_

Could you describe a normal day for your dog? \_\_\_\_\_

\_\_\_\_\_

How does your dog signify that it has to go out? \_\_\_\_\_

How much and what type of exercise does your dog normally enjoy? \_\_\_\_\_

Is there a game, activity or treat your dog especially loves? \_\_\_\_\_

Where does your dog usually sleep? On the floor, a cushion, a sofa, a crate etc...? \_\_\_\_\_

Your dog has lived: Indoors House, Garage, Basement, Dog crate/pen, Fenced yard, Kennel run,  
Other: List all that apply. \_\_\_\_\_

\_\_\_\_\_

## Temperament

Your dog is best described as: High energy, Happy, Timid, Snarky, Tolerant, Rowdy, Active, Laid back, Quiet, Shy, Timid, Well socialized, etc? List all that apply. \_\_\_\_\_

Is your dog reactive to certain stimulus, for example chases squirrels, rips cushions apart, hates cats or fears thunder, etc? \_\_\_Yes \_\_\_No

If yes, please describe: \_\_\_\_\_

Does your dog have any behavioural problems, such as separation anxiety, resource guarding, fears, aggression, etc? \_\_\_Yes \_\_\_No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

What specific action or response helps your dog calm down in stressful situations? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your dog has/does:

Lived(s) with children - ages? \_\_\_\_\_  
 Likes children - ages? \_\_\_\_\_  
 Likes strangers? \_\_\_\_\_  
 Prefers men or women? \_\_\_\_\_  
 Likes cats? \_\_\_\_\_  
 Likes dogs? \_\_\_\_\_  
 Likes other animals? \_\_\_\_\_  
 Nips (playfully)? \_\_\_\_\_  
 Bites (in anger)? \_\_\_\_\_  
 Ok being alone in house? \_\_\_\_\_  
 Ok in stormy weather? \_\_\_\_\_  
 Ok being alone in yard? \_\_\_\_\_  
 Ok being groomed, nail clipping etc? \_\_\_\_\_  
 Ok being handled, vet examination, etc? \_\_\_\_\_  
 Is your dog accustomed to:  
 Traveling by car? \_\_\_\_\_  
 Spending time in a crate? \_\_\_\_\_  
 Walking on leash? \_\_\_\_\_  
 Walking off leash? \_\_\_\_\_  
 Swimming? \_\_\_\_\_  
 Walking in crowds? \_\_\_\_\_  
 Urban environment? \_\_\_\_\_ Rural environment? \_\_\_\_\_  
 How does your dog travel?  
 Loose on the back seat \_\_\_\_\_ Secured with a safety harness \_\_\_\_\_  
 In a crate \_\_\_\_\_  
 What type of collar or other lead is your dog accustomed to?  
 Buckle collar \_\_\_\_\_ Martingale \_\_\_\_\_ Choker \_\_\_\_\_ Prong Collar \_\_\_\_\_  
 Gentle Leader \_\_\_\_\_ Harness \_\_\_\_\_ Other \_\_\_\_\_

### Dog Health

What type and brand of food(s) does your dog usually eat, what daily quantity, divided in how many meals? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Does your dog suffer from allergies/sensitivities, food related or other? \_\_\_ Yes \_\_\_ No  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

Are there any foods other than the regular food that your dog especially enjoys? Does he/she have a favourite treat? \_\_\_\_\_  
 \_\_\_\_\_

Is your dog allowed to chew bones? \_\_\_ Yes \_\_\_ No

If yes, which kind? Leather bones \_\_\_\_\_ Marrow bones \_\_\_\_\_

Other \_\_\_\_\_

Does your dog have any health concerns? \_\_\_ Yes \_\_\_ No

If yes, please describe: \_\_\_\_\_

Does your dog require any particular care or medication, such as eye drops, etc? \_\_\_ Yes \_\_\_ No

If yes, please specify \_\_\_\_\_

Did your dog receive their basic vaccination including rabies? \_\_\_ Yes \_\_\_ No

Please list all: \_\_\_\_\_

Are shots up to date? \_\_\_ Yes \_\_\_ No

Does your dog use protection against fleas and ticks? \_\_\_\_\_

Does your dog use protection against heartworm? \_\_\_\_\_

If spayed/neutered at what age? \_\_\_\_\_

If unspayed female, when was last heat cycle? \_\_\_\_\_

Is there any possibility your dog might be pregnant? \_\_\_ Yes \_\_\_ No

Please provide the contact information of the veterinarian(s) who has treated your dog in the past and currently if different. Use comments section below for listing additional veterinarian information if needed.

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Would you allow your dog's medical records to be forwarded to his/her new veterinarian?

\_\_\_ Yes \_\_\_ No

Would you be willing to provide health records to the Berger Picard Rescue? \_\_\_ Yes \_\_\_ No

Do you have any special requirement regarding the placement of your dog? \_\_\_\_\_

Additional comments/notes: \_\_\_\_\_

\_\_\_\_\_

**Thank you for answering all questions completely and honestly. Please remit this form to [bpca.rescue@gmail.com](mailto:bpca.rescue@gmail.com). We will be in contact with you shortly.**