



**Vizsla Club of Northern California**  
Profile of Vizsla Needing New Home

Date \_\_\_\_\_

To help us to find the best new home for your dog, please fill this questionnaire in accurately and honestly. Circle or mark the correct answers, and please give as much information as possible. Please return to Rescue Operations, 2063 Main St., Oakley, CA 94561 or fax to (925) 625-4358 or email to [rescue@vcnc.net](mailto:rescue@vcnc.net). Please include a recent photo if possible (jpgs fine).

**Name of person providing information:** \_\_\_\_\_

**Contact Details** Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

**If not the owner, please explain why** \_\_\_\_\_

**Owner's name?** \_\_\_\_\_

**Why does this Vizsla need to re-homed?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*How long are you willing to wait to find your dog a new home?* \_\_\_\_\_

**Vizsla's Pet Name:** \_\_\_\_\_ **Sex:** Male / Female **Age:** \_\_\_\_\_

**Vizsla's Registered Name:** \_\_\_\_\_

**Where did you get your Vizsla?** Breeder / Shelter or rescue / Pet Shop / Other  
*If other, please specify* \_\_\_\_\_

**How old was your Vizsla when you got it?** \_\_\_\_\_

**Who is the Breeder ?** \_\_\_\_\_

*Their address and/or phone number if known* \_\_\_\_\_

**Pedigree** Do you have a copy of the pedigree? Yes / No

**Microchipped?** Yes / No **Microchip Number:** \_\_\_\_\_

**Spayed / Neutered?** Yes / No Do you have a certificate from your Vet: Yes / No

**Vaccination status?** Current? Yes / No Due: \_\_\_\_\_

*Date last heartworm medication given?* \_\_\_\_\_

*Has heartworm medication been given regularly?* Yes / No

*Type of heartworm medication used* \_\_\_\_\_

**Minor Health issues** (eg skin rashes, allergies, etc; dietary issues; spay incontinence, and briefly how treated when required) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Major Health Issues** – (eg epilepsy, endocrine diseases, etc and briefly how treated if relevant) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does the dog have any issues with storms, winds, fireworks, etc?**

*Comments* \_\_\_\_\_  
\_\_\_\_\_

**What is the Vizsla's normal diet?**(eg dry kibble, mixed kibble with fresh meat, cooked, raw/BARF diet, etc) \_\_\_\_\_

\_\_\_\_\_ *Do changes in diet affect your dog?* Yes / No

**Current Family members:**

*Male Adults* \_\_\_\_\_ *Female Adults* \_\_\_\_\_  
*Children – Males:* \_\_\_\_\_ *Aged:* \_\_\_\_\_ *Females:* \_\_\_\_\_ *Aged:* \_\_\_\_\_  
*Other Pets (please specify eg older female dog, cat, etc)* \_\_\_\_\_

**Who is the primary care giver for the dog in the household?** (eg Feeding, exercising, etc.) \_\_\_\_\_

**Who is responsible for the dog's training?** \_\_\_\_\_

**Is the dog equally comfortable with both men and women?** Yes / No

*Comments:* \_\_\_\_\_

**Is the dog comfortable with children?**

	YES	NO	SOMETIMES	DON'T KNOW
<i>Children 0-3yrs</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Children 4-8yrs</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Children 8-12yrs</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Children over 12 yrs</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Comments:* \_\_\_\_\_  
\_\_\_\_\_

**Has your Vizsla ever bitten anyone?** \_\_\_\_\_

**Is the dog good with other animal species?**

*Dogs* Yes / No      *Cats* Yes / No      *Other*

*Comments:* \_\_\_\_\_  
\_\_\_\_\_

**How would you describe the dog's excitability levels?**

*Very quiet / Calm but alert / Excitable / Very Excitable / Hyperactive*

**How would you describe the dog's daily exercise needs?**

*30 mins off lead*       *60 mins off lead*       *30 mins on lead*   
*60 mins on lead*       *More than 60 mins on lead*

**What is the dog's level of basic social obedience?**

*Does the dog walk nicely on a lead?* Yes / No

*Does the dog normally have a* Choke Chain / Flat Collar / Halti type Collar / Prong Collar

*Check the answer which best describes your dog's response to the following commands*

	<b>ALWAYS</b>	<b>USUALLY</b>	<b>SOMETIMES</b>	<b>NEVER</b>
<i>Comes when called if off lead</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Sits when asked</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Drops when asked</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Stays when asked</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Tell us what your Vizsla does or likes best (eg retrieving, swimming, playing with other dogs/people, etc) \_*

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*Does the dog have any bad habits? eg jumping up excessively, barking excessively, etc Comment (including measures previously taken to remedy these problems):* \_\_\_\_\_

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*Does the dog do any tricks, or have any special habits or mannerisms? Yes / No*  
*Tell us about them*

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**Does the dog have indoor privileges?** *Yes / No*  
*Regularly?* *Yes / No*

*If so, will the dog lie quietly on a mat or other regular place?* *Yes / No*

*How much time does the dog normally spend indoors per day?* \_\_\_\_\_ *hours*

*How much time does the dog normally spend outdoors per day?* \_\_\_\_\_ *hours*

**Is the dog happy to be left alone?** *Yes / No*

**Is the dog happy to be outside alone?**

*a) During the day* *Yes / No*

*b) At night* *Yes / No*

**How many hours per day is the Vizsla usually alone?** \_\_\_\_\_ *hours*

**Has the Vizsla escaped from your yard?** *Yes / No* **Regularly?** *Yes / No*

**What kind of fencing do you have?** \_\_\_\_\_ *How high?* \_\_\_\_\_

**Is the dog crate trained?** *Yes / No*

**Does the dog travel well in the car?** *Yes / No*

**Signed:** \_\_\_\_\_

**Relationship to dog:** \_\_\_\_\_

**How did you find VCNC Vizsla Rescue?**

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*Please feel free to add additional pages if you wish to include more information.*