

The Dog and I - New Client Form

Name of Dog _____ female / male spay/neut

Breed(s) _____ Color(s) _____

Birthdate _____ Weight _____

Owners names _____

Address _____ City _____ Zip _____

Home Phone _____ Work _____ Cell _____

Email _____

Emergency Contact(s) _____ Phone _____

Veterinarian (name & location) _____ Phone _____

Other people authorized to pick up your dog _____

Does your dog have previous boarding experience? If so, where? How did it go?

Has your dog ever bit (person or dog) or been bitten? If so, please describe circumstances.

Is your dog disturbed by anything? (ie. loud noises, brooms, crates, children...)

Please describe. _____

Is your pup an Escape Artist or Digger? _____

Is your dog crate trained? _____

Any dietary imitations/allergies? _____ Describe.

Any current or ongoing health issues? _____

Is your dog on medication? If so, describe _____

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