

Lucky Dog B&B Daycare & Boarding Pet Intake Form

Pet's Name: Breed: Age:	
Weight:	
Gender:	
(Male / Female / Spayed or Neutered)	
Color/Markings:	
Microchip Number:	
(if applicable)	
Crate Trained?	
Does your dog enjoy group play with	
other dogs? (Yes/No/Sometimes)	

Vet Name & Clinic: Clinic Phone Number: Vaccination Record Attached: (yes/no) Flea/Tick Preventative Used: Any known allergies: Any chronic medical conditions or recent surgeries: Current medications: (name, dosage, and instructions)

Behavior & Personality

How does your dog react to new people or other dogs?	
Any behavioral issues we should know about? (e.g. jumping, barking, food aggression)	
Has your dog ever bitten or shown aggression?	

Does your dog have separation anxiety or other stress triggers?	
Routine & Comfort	
Feeding schedule:	
(including amounts and frequency)	
Type of food provided:	
Treats allowed? (Yes/No — if yes, list any restrictions)	
(res/No — ij yes, list ariy restrictions)	
Favorite toys or activities:	
Anything that helps your dog feel at home or relaxed?	
Owner Contact Information:	
Primary Owner Name:	
Phone Number:	
Email Address:	
Emergency Contact Name:	
Emergency Contact Phone Number:	
Authorized for medical decisions? (Yes/No)	
	s form is complete and accurate to the best of my knowledge. I used to care for my pet while they are at Lucky Dog B&B.
Name (print)- Pet Owner	
Name (signature) – Pet Owner	
Date	