



# The Dog House Retreat Boarding & Daycare Registration

## CLIENT INFORMATION

NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAIN PHONE \_\_\_\_\_ ALT PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_

EMERGENCY CONTACT PHONE \_\_\_\_\_

HOW DID YOU HEAR ABOUT US? IF REFERRAL, BY WHOM? \_\_\_\_\_

## VETERINARY INFORMATION

CLINIC \_\_\_\_\_

VETERINARIAN \_\_\_\_\_ PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

## DOG #1 INFORMATION

NAME \_\_\_\_\_ BREED \_\_\_\_\_

COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_ DOB \_\_\_\_\_

SEX: M / F      SPAY/NEUTER: YES / NO      PLAYTIME: YES / NO

CAN YOUR DOG CLIMB OR JUMP A 6' FENCE? YES / NO

ALLERGIES \_\_\_\_\_

FEEDING INSTRUCTIONS \_\_\_\_\_

MEDICATION/INSTRUCTIONS \_\_\_\_\_

PRE-EXISTING MEDICAL CONDITIONS \_\_\_\_\_

RESTRICTIONS \_\_\_\_\_

SPECIAL INSTRUCTIONS \_\_\_\_\_



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## DOG #2 INFORMATION

NAME \_\_\_\_\_ BREED \_\_\_\_\_

COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_ DOB \_\_\_\_\_

SEX: M / F      SPAY/NEUTER: YES / NO      PLAYTIME: YES / NO

CAN YOUR DOG CLIMB OR JUMP A 6' FENCE? YES / NO

ALLERGIES \_\_\_\_\_

FEEDING INSTRUCTIONS \_\_\_\_\_

MEDICATION/INSTRUCTIONS \_\_\_\_\_

PRE-EXISTING MEDICAL CONDITIONS \_\_\_\_\_

RESTRICTIONS \_\_\_\_\_

SPECIAL INSTRUCTIONS \_\_\_\_\_

## DOG #3 INFORMATION

NAME \_\_\_\_\_ BREED \_\_\_\_\_

COLOR \_\_\_\_\_ WEIGHT \_\_\_\_\_ DOB \_\_\_\_\_

SEX: M / F      SPAY/NEUTER: YES / NO      PLAYTIME: YES / NO

CAN YOUR DOG CLIMB OR JUMP A 6' FENCE? YES / NO

ALLERGIES \_\_\_\_\_

FEEDING INSTRUCTIONS \_\_\_\_\_

MEDICATION/INSTRUCTIONS \_\_\_\_\_

PRE-EXISTING MEDICAL CONDITIONS \_\_\_\_\_

RESTRICTIONS \_\_\_\_\_

SPECIAL INSTRUCTIONS \_\_\_\_\_