## Happiness is Pets

## Client & Pet Information Form

CLIENT INFORMATION:	
Name(s):	
Email Address:	
Street Address:	
City, State,Zip:	
Phone Numbers: (please check preferred primary number)	
□Home:□Work:	
Other	
Emergency Contact Name & Phone:	
Veterinarian Name & Phone:	
How did you hear about Happiness is Pets?	
May we put a picture of your pet on our website?	
HOME INFORMATION:	
Pet Food Location: Food Dish Location:	_
Water Bowl Location: Treats:	_
Cleaning Supplies Location (in case of accident):	
Garage code and Instructions for Home Entry:	
Parking Preference:	
Alarm Location: Alarm Code: Dog Door: $\Box$ Y $\Box$ N	
-	
Invisible Fence: □Y □N Invisible Fence and Collar Instructions:	
Leash or Harness Location:	
Water Shut Off Valve Location: Breaker Box Location:	
Cleaning Service Day and Other Anticipated Visitors:	
PET 1 INFORMATION:	
Name:	
□Dog □Cat □Horse □Other Age:	
Breed:	
Gender: Spayed/Neutered: $\Box Y \Box N$	
Is pet current on all vaccinations? $\Box Y \Box N$ If no, please refer to Service Agreement for policies. Pet Temperament and any Additional Information:	
PET 2 INFORMATION:	
Name:	

Breed: Spayed/Neutered: $\Box$ Y $\Box$ N  Is pet current on all vaccinations? $\Box$ Y $\Box$ N If no, please refer to Service Agreement for policies.
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Is not current on all vaccinations? $\Box Y \Box N$ If no please refer to Service Agreement for policies
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Pet Temperament and any Additional Information:
PET 3 INFORMATION:
Name:
□Dog □Cat □Horse □Other Age:
Breed:
Gender: Spayed/Neutered: $\Box$ Y $\Box$ N
Is pet current on all vaccinations? $\Box Y \Box N$ If no, please refer to Service Agreement for policies.  Pet Temperament and any Additional Information:
Anything else you would like to add?