



Bailey's Bath House

Animal Registration Form

Owner(s) Information

Name(s) _____ Phone _____

Address _____

Email _____

Emergency Contact _____ Phone _____

Animal Information

Animals' Name _____ DOB or AGE _____

Breed _____ Gender _____

Allergies/Sensitivities

My Animal's Temperament (check all that apply):

- | | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> Harmless | <input type="checkbox"/> Protective | <input type="checkbox"/> Nibbler |
| <input type="checkbox"/> Friendly | <input type="checkbox"/> Aggressive | <input type="checkbox"/> Barker |
| <input type="checkbox"/> Excited | <input type="checkbox"/> Aggressive toward animals | <input type="checkbox"/> Jumper |
| <input type="checkbox"/> Anxious | <input type="checkbox"/> Aggressive toward people | <input type="checkbox"/> Piddles |
| <input type="checkbox"/> Separation Anxiety | <input type="checkbox"/> Biter | <input type="checkbox"/> Other _____ |

Known behavioral issues: _____

Has your animal ever bitten anyone requiring medical care? _____

Vet Information

Name _____ Phone _____

Address _____

I certify the information above is true and correct to the best of my knowledge.

Signature _____ Date _____

Please note electronic signatures are not accepted. Please sign after printing.

For internal use only:

- | | | | |
|-------------------------------------|------------|------------|----------------|
| <input type="checkbox"/> Rabies | Date _____ | Exp. _____ | Reminder _____ |
| <input type="checkbox"/> Distemper | Date _____ | Exp. _____ | Reminder _____ |
| <input type="checkbox"/> Parvo | Date _____ | Exp. _____ | Reminder _____ |
| <input type="checkbox"/> Bordetella | Date _____ | Exp. _____ | Reminder _____ |