



## Pet Information

Dog's Name:

Breed:

Date of Birth:

Gender:

Spayed/Neutered:

Coat Colour:

Eye Colour:

License #:

Microchip #:

Medical Conditions:

Allergies:

Food Brand:

Meal Frequency/Amount:

Likes:

Dislikes:

Regular Exercise Routine:

Is your dog crate trained?

If not, what are the sleeping arrangements?

Does your dog get along with other dogs?

Does your dog get along with children?

Has your dog ever been boarded anywhere before? Was this a boarding kennel or someone's home?

Has your dog been to doggy daycare? If yes, did they do well in that environment?

I brought with me (dog bed, food, leash, toys, etc):

Is your dog free of fleas and ticks?

Is your dog up to date on the following vaccinations?

- DHPP
- Bordetella
- Rabies

\*Please forward a copy of these records.

Is there anything else you would like to tell us about your pet?