

Date: _____

CLIENT DATA FORM



CLIENT INFO

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|--------------------|
| NAME: |
| ADDRESS: |
| E-MAIL: |
| PHONE NUMBER: |
| MOBILE: |
| EMERGENCY CONTACT: |

DOG INFO

| | | |
|---|--------------|----------|
| NAME: | LEAD: | YES / NO |
| BREED: | BOWL: | YES / NO |
| SEX: | BED: | YES / NO |
| AGE: | MUZZLE: | YES / NO |
| NEUTERED (SPAYED): YES / NO | IF YES DATE: | |
| FOOD: | | |
| VACCINES – Please list last date given | | |
| PARVO: | RABIES: | |
| KENNEL COUGH: | | |

MEDICAL REQUIREMENTS:

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FEEDING REQUIREMENTS:

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PLEASE LET US KNOW HERE IF THERE IS ANYTHING ELSE THAT WE NEED TO KNOW ABOUT YOUR DOG, i.e. HABITS, ISSUES, ROUTINES, etc.

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VET / INSURANCE DETAILS

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|-------------------------|
| VET NAME: |
| TELEPHONE NUMBER: |
| INSURANCE COMPANY NAME: |

TRAVEL INFO:

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|-----------------|
| DATE OF TRAVEL: |
| DATE RETURNING: |
| CONTACT: |

How did you hear about Waggingtons? Google Yahoo Yell Friend/family
 Magazine/Paper Other _____

DISCLAIMER:

I agree that Waggingtons LTD have permission to take _____ to their Vet, should the need arise and I will cover all costs on my return.

I agree that _____ can be socialized and mix with all other dogs while at Waggingtons.

DATE:

SIGNATURE

While we love all dogs, we only accept dogs that are spayed/neutered, and we do not accept dog breeds with lockjaw.

All data provided is strictly confidential and will not be passed on to any third parties.