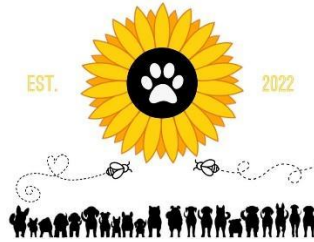


Pawsome Puppies Wag'n Inn, LLC
DOG BOARDING & DAYCARE



Application

About You

Owner's Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Secondary Phone: _____

Email: _____

How did you hear about Pawsome Puppies Wag'n Inn? _____

Emergency Contact (**OTHER THAN OWNER**):

Name: _____ Phone: _____

Authorized Handlers – Pawsome Puppies Wag'n Inn will release your dog to the following person(s):

About Your Pup

Name of Pet: _____

Breed: _____

Male / Female

Neutered / Spayed

Weight: _____ Color: _____ Birthdate: _____

Veterinarian's Name/Clinic: _____ Phone: _____

Address: _____ City: _____

For vaccinations, please bring a verification form from your veterinarian showing proof of all required vaccinations.

Does your dog have a microchip? Yes / No

If yes, Brand & Number:

Method of flea control: _____

Has your dog been ill in the last 30 days? Yes / No

Is your dog displaying any unusual symptoms such as coughing, sneezing, or upset stomach? Yes / No

Any restrictions that need to be placed on your dog's physical activities or movements? Yes / No

If yes, please explain: _____

Has your dog ever bitten a person or another dog? Yes / No

If yes, please explain: _____

Has your dog ever exhibited aggressive behavior towards people or other dogs? Yes / No

If yes, please explain: _____

Has your dog ever been bitten or attacked by another dog, or been abused? Yes / No

If yes, please explain: _____

Does your dog board well? Yes / No / Never Boarded

If no, please explain: _____

Does your dog eat or chew on his bedding? Yes / No

Training History

Please detail all verbal and/or hand commands that your dog knows for the following actions:

Sit _____

Stay _____

Come _____

Lay Down _____

Off/Down (if he/she jumps at people) _____

Bathroom _____

Other _____

Does your dog have any specialty training (i.e., search & rescue, therapy, agility)?

Does your dog play with toys? Yes / No

If yes, favorite kind? _____

What are your dog's favorite games? _____

Feeding

Brand

(ex. Science Diet, Pedigree, Iams)

Flavor

(ex. Chicken, Chicken & Rice, Salmon)

Size/Stage

(ex. Adult, Puppy, Senior)

How much food & how often?

(ex. 1 cup 2 x a day, 2 cups 1 x a day)

Normal meal behavior:

- Eats all food at mealtime
- Nibbles throughout day
- Goes for periods without eating
- Sometimes requires more palatable food to be mixed in to eat

Does your dog have any allergies? Yes / No

If yes, please explain _____

