



DOGINHAUS
SPA & LODGE FOR THE WELL-HEELED

CLIENT PROFILE

September 2009

OWNER INFORMATION

Owner Name: _____

Mailing Address: _____

Owner Telephone (Home): _____ (Work or Cell) _____

Email: _____

CLIENT'S INFORMATION

Dog's Name: _____ Dog's Birthday: _____ Dog's Age: _____

Dog's Color: _____ Dog's Breed: _____

Dog's Weight: _____ Microchip # (if available) _____

Dog's Sex: _____ Spayed: _____ Neutered: _____

VETERINARIAN INFORMATION

Veterinarian Name: _____

Veterinarian Address: _____

Veterinarian Telephone Numbers: _____ (work) _____ (cell)

Vaccination expirations: Rabies: _____ Bordatella: _____ DHLPP: _____

Authorized Veterinary Urgent Care Spending Limit: \$ _____

EMERGENCY CONTACT

Local emergency contact: _____ Phone: _____

Authorized release contact for pick up: _____

Contact phone (cell) _____ (work): _____

FEEDING

Times per day: _____ Morning Afternoon Evening

Type of food: _____ Treats: _____

Qty per feeding: _____ OK to add something to food: chicken or tuna or cheese

Special feeding preparations: _____

MEDICAL

Does your dog take any medications? *Yes or No*

If yes, please list the medications or care requirements and possible side effects:

Is your dog allergic to any medications? *Yes or No*

If yes, please list the medications:

Does your dog have any injuries or chronic health problems? *Yes or No*

If yes, please list the injuries and explain:

BEHAVIOR

How would you describe your dog's activity level: *Low / Average / High*

Has your dog ever bitten a person? *Yes or No*

If yes, please explain:

Has your dog ever bitten another dog or acted unfriendly towards another dog? *Yes or No*

If yes, please explain:

Have you boarded your dog before? *Yes or No*

If yes, was the experience positive?

Is your dog house trained? *Yes or No*

Does your dog have a tendency to chew things (beds, toys, etc.) *Yes or No*

Have you participated in any type of formal obedience training with your dog? *Yes or No*

If yes, please explain:

Does your dog try to escape enclosures or jump fences? *Yes or No*

List any other special care or boarding requirements to be provided by Doginhaus:

If more than one Pet is covered by this Agreement, provide all of the above Pet information on a separate sheet to be attached to this AGREEMENT.

DOGINHAUS

Date

Owner signature

Date