

Play Dog Play Boarding Information

Pet Information

Dogs Name: _____ Breed: _____ Male / Female

Age: _____ Birthday: _____ Spayed / Neutered

Temperament: Calm / Energetic / Highly Energetic

Is your dog good with people? _____

Is your dog good with other dogs? _____

Diet Information

We ask that you bring your own food with your dog, we like to make things as consistent as possible for our furry friends.

What brand of food does your dog eat? _____

When does he/she eat? AM / PM/ BOTH How much? _____

How does your dog eat at feeding times? Slow / Medium / Fast

Is your dog allergic to any foods? YES / NO

If so what is it and what is the reaction? _____

Veterinarian & Medical Information

Hospital Name: _____ Veterinarian: _____

Phone Number: _____

Current shot information: Rabies: _____ DHPP: _____ Bordetella: _____

Is your dog currently taking any medication? YES / NO

If yes what is the medication, reason, and schedule: _____

What flea medicine do you use? _____ Date administered: _____

What heartworm medication do you use? _____ Date administered: _____

Does your dog have any injuries or health concerns that may limit activities and or movement?

In case of medical emergencies after hours and we cannot contact your vet or emergency contact person, we will take your dog to Animal Care Center in Rohnert Park.

Dogs Personal Information

Is there a special toy / bed / blanket your dog sleeps with? _____

Is there a special game or toy your dog likes? _____

Is there anything your dog loves / does not like? _____

Anything else you would like us to know? _____

Client Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Alternate Phone: _____

Emergency Contact Person if we cannot reach you:

Name: _____ Phone: _____

Other Phone: _____

How did you hear about us? _____

Assessor's Name: _____ Date: _____