



Owner's Name: _____ Date: _____

How did you find us?: I am an existing customer Referred by _____ Online Walk-by Ad

Dog's Name: _____ Breed: _____ Gender: M F

Age: _____ Birthday: _____ Colour: _____ Weight: _____

Spayed/Neutered** Rescue Dog (please specify from where): _____

(**Un-neutered males over 7mths of age are not able to attend daycare. Female dogs in heat are also not able to attend daycare, boarding, or training. However please speak with us to see how we might be able to make other arrangements for you.

Number of years you have owned your dog: _____

Behavioral Notes

Aggressive Bites Anxiety Anti-social Leash aggression (specify: _____)

Pulls on leash Toy aggressive Food aggressive Flight risk Not house-broken Marks

Excessive barking May not like certain breeds such as: _____

Known Commands _____

Any other Issues to note: _____

Is your dog capable of walking or playing off-leash on trails or dog parks? Yes No

Do you give us permission to take your dog off-leash on such trails & dog parks? Yes No

Health Notes

Allergies: _____

Food Restrictions: _____

Pre-existing injuries: _____

Frequent diarrhea Arthritis Other chronic illness: _____

Medication required: _____

Other notes: _____

Vaccination Due Dates

DHPP _____ Rabies _____ Bordatella _____ Titer Test _____

(Not required but please advise if your dog also has the following with dates: Hepatitis _____ Coronavirus _____)

Food Notes

Raw Dehydrated Raw Dry Food Canned Food

Brand: _____ Daily Feeding Guide: _____

Owner's Contact Info:

Cell: _____ Home: _____

Work: _____ Other: _____

Address: _____

Email: _____



Alternate Emergency Contact:

Name: _____ Relation: _____

Tel: _____ Other: _____

Email: _____

Veterinary Clinic: _____ Tel: _____

Pet Insurance Provider: _____

In the event of an injury and you or your emergency contact are unable to be reached do you authorize Wagababa Pet Shop Inc. to take your dog to the veterinary clinic listed at your expense?

_____yes____no

In the event that the listed veterinary clinic listed is unable to receive your dog for treatment do you authorize Wagababa Pet Shop Inc. to take your dog to a vet clinic of our selection at your expense?

_____yes____no

_____ *sign here*