



Enrollment Form

Owner's Name:			Cell Phone:		May we text you for pick-up etc.?
Grooming Pick up time:			Alternate phone:		
Immunization Verification: Where were immunizations given?			Emergency Contact:		
DHPP Due: _____ Rabies due: _____			How did you hear about us?		
Bordetella Due: _____			Email:		
Grooming Instructions:			Preferred Vet: Name: Address: Phone:		
Pet Name	Weight	Color	Breed	M/F- Spay/Nut?	Age
				/	
				/	
				/	
				/	
Boarding:		Day	Date	Time	Items Checked in for Boarding:
Start:					
End:					
Special Instructions (feeding, meds, grooming etc.) Please specifically describe any physical or medical problems we should be aware of including allergies or behavior issues.					
Has your pet ever bitten or been aggressive towards a person or another animal? If so, please explain:			Can your dog climb and/or jump a: 38" door? Yes/No 4 ft. Fence Yes/No 6 ft. Fence Yes/No Notes:		
Release: By signing this form you are agreeing to comply with all of On the Spot Pet Care's policies and procedures. Policies and procedures are posted online and on premise. You may print a copy for your records as well as have them emailed to you at any time. Policies and procedures apply to everyone and anyone who may drop off, pick up, or schedule service for your pet(s) on your behalf.					
Client Signature:			Date: _____		