

## REGISTRATION FORM

Please fill out separate forms for each pet in household

Date:			
Client Information			
Owner First and Last Name:			
Address: Apt. #:			
City: Zip:			
Phone: Cell or alternate phone:			
Email:			
Emergency Contact Info:			
Alternate person who may pick up pet from us:			
Special Password:			
Pet Information			
Name:			
Age & Birth Date:			
Breed:			
Weight:			
Male or Female:			
Check one: ☐ Spayed ☐ Neutered ☐ Unaltered			
<ul> <li>We only allow unfixed dogs to attend daycare or board at Heart and Soul K9 if the</li> </ul>			
dogs are 6 months or under. We apologize for any inconvenience.			
Microchip or Tattoo Number:			
Pet Health			
Pet has received up-to-date immunizations*			
* Please attach a photocopy of immunization record			
☐ Yes			
☐ No If no, explain:			
Name and phone number of vet:			
Clinic Name:			
Medical Conditions:			
Allergies:			
Please list all medications (allopathic or homeopathic) which your dog is currently taking, and what your			
dog is taking them for			
Are there any places your dog does not like to be touched, during grooming or otherwise?			



Has had flea/tick prevention:	☐ Yes ☐ No
Has had heartworm prevention:	□ Yes □ No
Physical Limitations (sore back,	hip dysplasia, etc.):
Insured? Nan	ne of Company:
Pet Background	
Previous training:	
-	
	Any sensitive spots?
	pet?
_	on with people and with dogs (eg. Goes to dog park once a week; Always
alone at home; etc.). If they go to	the dogpark, please tell us how they act at the dogpark:
Pet is afraid of:	
Pet's preferred reward:	
Favorite toys:	
Favorite games:	
Pet Behavioral Challenges (ch	eck all that apply):
☐ Biting, hissing or growling at µ	people (explain reasons)
$\hfill \square$ Aggressiveness with other an	imals (explain reasons)
☐ Shyness	
☐ Jumping on people	
☐ Jumping over fences	
☐ Chewing or digging	
☐ Chasing small animals	
☐ Escaping out on open door	
☐ Excessive pulling on leash	
☐ Pulling out of leash	
☐ Running away	
Feeding	
•	
	unt):
	Treats okay?
	NOT have?
Tany Stand of 1000/freat pet may	TOT Have:
Often, dogs who are in a new pl	ace away from home are reluctant to eat. Can we add some
of our cooked chicken to entice	your dog to eat?



What are your favorite things about your dog?			
What are the main reasons you are bringing your dog your dog will get out of the experience?			
Where did you hear about Heart and Soul K9?  Google Yelp Citysearch Yahoo Other online/internet source: Already Grooming client Already Training client Friend: Other:  Payment Cost per day: Cost	☐ Drove by		
Pre-purchase Payment Received:			
Future payment arrangements:			
I have read and understood t	he liability waiver and release form.		
Client Signature	Date		
Please provide us with the following credit card inform purpose other than (1) you asking for some of your bit care for your dog.  • Credit Card Type:  • Credit Card Number:  • Credit Card Expiration Date:	I to be placed on the card or (2) emergency		
Credit Card CCV Code			

Thank you so much for taking the time to tell us about your dog and yourself!!

Please read the release which comprises the remainder of the Heart and Soul K9 application and sign and date the bottom of the application. Thank you!