



Waggin' Tails

BED AND BISCUIT RESORT

Dog Information Sheet

▶ Please download PDF file directly to Acrobat Reader to access this interactive form. After filling in the form fields, email it directly by clicking on the EMAIL button below; or attaching it to an email and sending it to: houseofdoggs@cox.net

OWNER'S NAME

ADDRESS AND PHONE

VET NAME AND PHONE

EMERGENCY CONTACT PERSON AND PHONE

BREED 1

NAME

SEX

AGE

WEIGHT

FIXED

CHIP

EATS

RABIES

DAP2PP

KENNEL COUGH

BREED 2

NAME

SEX

AGE

WEIGHT

FIXED

CHIP

EATS

RABIES

DAP2PP

KENNEL COUGH

BREED 3

NAME

SEX

AGE

WEIGHT

FIXED

CHIP

EATS

RABIES

DAP2PP

KENNEL COUGH

ATTITUDE WITH OTHER DOGS

EVER REFUSED

SPECIAL NEEDS

SLEEPS

TREATS

POTTY HABITS

ALLOWED ON FURNITURE?

DIG?

CHEW?

CLIMB?

RUN AWAY?

BITE?

DISCLAIMER: YOU WILL BE CHARGED FOR DAMAGES OVER \$25.00

PERMISSION TO SEEK VETERINARY CARE

While I understand that Waggin' Tails makes every effort to ensure the safety of the animals left in its care, I acknowledge that health issues and accidents do occur. As the owner of _____, I consent to allow Waggin' Tails to obtain veterinary care or ER care if it is necessary. I understand that the expense incurred on behalf of my dog shall be reimbursed to Waggin' Tails when the animal is picked up.

Dated _____

Owner Signature* _____

**Please sign in person at Waggin' Tails*



CASH OR CHECKS AT TIME OF PICK UP