**Boarded Dog, Information**

**Camp Jimmydog**

*\*Please fill out one form for each dog so that we may provide the best possible care for your pet. Thank you.*

Owner(s):

Address:

Phone(s): Home:

Cell:

2nd Cell:

Other:

E-Mail:

Emergency contact- This is someone **other than yourself or your vet** that we would contact should we not be able to contact you *or* in the event that something were to happen to you. They do not need to be AZ residents.

Name:

Phone:

Location :

Relationship:

 **All dogs over 6mos. of age must be spayed or neutered.**

Dog’s Name:

Male / Female Spayed / Neutered Microchipped: Yes No

Breed:

Colors/Markings:

D.O.B.:

**\***All dogsMUSTbe current on vaccines (DHLPP initial then every 3yrs. Or as recommended by your Vet, Bordatella, Rabies 1 to 3yr as required)

Please attach current vaccination records.

Vaccines given by (Vet Clinic)

Is this your regular vet clinic?

If not who is? Dr.

Clinic/Office

Type/ Brand of food:

Feeding Time(s):

Amount

Any medical conditions? Y/N

What?

Treatments/Medications :

What commands does your dog know: Sit ⁭Stay Come Other:

Normal exercise routine when home:

Favorite Toys/Games:

 Precautions: barker, chewer, digger, fence jumper, people, other dogs, leg lifter, etc

**\*Marking:** Many dogs, while not markers at home, mark when in an environment with other dogs. A $5 fee will be charged for doggie diaper pads if this ends up being the case with your dog.

Has your dog ever bitten another dog or person? Y/N

 Where does your dog sleep at night?

Has your dog been crate trained?

 Anything else we should know?:

*\*This form will be kept on file for all future visits. If any of the above info. changes, you are responsible to let The Jimmydog Co. know.*

I, , have entered the above information as truthfully and accurately as possible.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Client Signature Date