



PET INFORMATION FORM

Questions? Please give us a call
P: **847.272.8150**
F: **847.272.8130 Fax**

Please fill out the following information and return to Doggie Do-Rite Daycare

Pet Information

Pet Name: _____

Sex: Male Female Approx. Weight: _____

Birthday: Month _____ /Date _____ /Year _____

Breed: _____ Color: _____

Spayed or Neutered Date (required): _____

Where did you get your dog from? _____

If you rescued your dog please describe any known history: _____

How long have you had your dog? _____

Where to find parents

Name: _____

Home Address: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Pager: _____

What phone number is best to reach you during the day? Home Work Cell Pager

Place of business? _____

E-mail: _____

Where did you hear about us? _____



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In an Emergency

Your Veterinarian**:

Phone: _____

City: _____ State: _____

Who is authorized to pick up your dog from daycare?

Emergency contact if you are not unavailable:

Name: _____ Phone: _____

In the event that your dog becomes ill we will attempt to contact you. If you are unavailable, we will attempt to contact your Emergency Contact that you have supplied.

** In an emergency your dog(s) will be taken to Northbrook Animal Clinic (847) 291-2261 or Vet Specialty Center (847) 459-7535. You will be notified immediately.

Dogs must be in good health. Dogs are required to be on a flea and heart worm program.

Heart Worm Program: _____

Flea Prevention Program: _____

Dogs nails must be kept at a reasonable length so that others don't get scratched.

To be filled out by Doggie Do-Rite: (Copy from Veterinarian Required)

Vaccination dates: _____

Rabies: _____

Distemper: _____

Bordetella: _____

Rabies License #: _____

