

Dog's Name - Surname-

KENNEL

CIRCLE YOUR ANSWERS PLEASE:-

1. Is your dog currently receiving any Veterinary Treatment- ?

YES/ NO if YES please give the following information

WHAT THE TREATMENT IS-

WHEN THE DOG LAST ATTENDED THE VET

Date last wormed -

over a year?

Date last flead -

over a year?

2. Does your dog have any special dietary requirements ?

YES / NO

if YES – What ?

3. Does your dog have any allergies ?

YES / NO

If YES – What are they

4. Is your dog healthy and free from any injury, lumps and bumps or sickness ?

YES / NO

If NO please explain

If we find something worrying, not mentioned here ,we will take your dog to vets at your cost

WE CANNOT GUARANTEE TO RETURN ANY TOYS/BLANKETS DUE TO VOLUME OF WASHING

Signed-

Date-

WHERE YOU GOING ?

EMERGENCY NUMBER FOR THIS PERIOD AWAY:

DATE YOU ARE COLLECTING-

AM OR PM

Is your dog insured – **YES / NO ?**

If your dog is ill /injured shall I **PLEASE TICK ONE ONLY**

CALL VET

CONTACT YOU

CONTACT EMERGENCY NUMBER

WOULD YOU LIKE TO BOOK A -- BATH ? YES / NO

GROOM ? -YES / NO

How do you want the groom ?

WITH 10 % DISCOUNT ON BOTH WHILE YOUR DOG IS WITH US

Nails £ 8 **YES / NO**

WOULD YOU LIKE TO BOOK EXTRA EXERCISE ? YES / NO

Extra exercise £5 Double £7 can be every day or just some days -

OWN FOOD INSTRUCTIONS – AMOUNT =

ONCE / TWICE A DAY

STAFF ONLY –Initial when all requests are sorted

Green card

ex board

BILL !!

Grooming book