



INN THE DOGHOUSE
 10237 Berea Road, "H"
 Cleveland, Ohio 44102
 (216) 651-0873

CLIENT INFORMATION

OWNER INFORMATION	Name(s)	_____		
	Address	_____		
	City	State	Zip Code	_____
	Home Phone	Work Phone	Cell Phone	_____
	Email Address	_____		

EMERGENCY CONTACT	Name	_____		
	Home Phone	Work Phone	Cell Phone	_____
	Others I Authorize To Pick Up My Dog _____			

VETERINARY INFORMATION	Primary Clinic	Dr.	Phone	
	Address		City	State

PET INFORMATION	Name	_____		
	Breed	_____		
PET 1	Sex	DOG	CAT (circle one)	
	Date of Birth	NEUTERED	SPAYED (circle one) If not, when? _____	
PET 2	Name	_____		
	Breed	_____		
PET 2	Sex	DOG	CAT (circle one)	
	Date of Birth	NEUTERED	SPAYED (circle one) If not, when? _____	
	Needs Medications	Yes	No (circle one)	
	Reason	_____		Type _____
	Amount	_____		
	Is house broken	Yes	No (circle one)	
	The last accident they had was	Where? _____	Why? _____	
	My pet plays best with (circle all that apply)	BIG DOGS	LITTLE DOGS	OLDER DOGS
		YOUNG DOGS	PUPPIES	
	My pet is (circle all that apply)	SHY	MELLOW	AGGRESSIVE
		ACTIVE	COUCH POTATO	EXCITABLE
			CONTENT TO BE AROUND OTHERS	



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(continued.)

My Dog(s) favorite

Toys _____ Toy to destroy _____

Activity _____

Place in the house _____

My dog is trying to learn the following commands _____

My dog is easily scared by _____

My dog has (circle all that apply)

BITTEN

GROWLED SNARLED

BARED TEETH

SHOWN THREATENING BEHAVIOR

Explain situation of any/all circled above

My dog is allowed on furniture at home

Yes | No (circle one)

No BUT is okay at INN THE DOGHOUSE

Reason for using daycare service _____

How did you hear about INN THE DOGHOUSE? _____

Additional information I would like you to know about my dog:

I acknowledge that all above information is correct:

Signature

Date