

Gone Wild Kennels

P.O. Box 8 Site 14 RR1 Cochrane, AB T4C 1A1 403-932-7570

Web Site: www.gonewildkennels.com e-mail: gwkennel@gmail.com

<u>Instructions:</u> If you have more than one dog, each dog does not need a separate form. However, please indicate each vital statistic separately.

Dog Boarding Application

Tell Us About Yourself

Name			
	Apt		
City	Prov	Postal Code	
Home Phone	Fax		
Work Phone	Emergency Phone		
Email	Cell Phone		
Who else is authorized to drop off/pic	ck up the pet(s)?		
Instructions in Case of Emergency			
How did you hear about us?			
Do you require a pickup or delivery for	or your dog?		

Tell Us About Your Pet

Name	Breed	I	OOB/Age
Sex: Male / Female		Spayed / Neutered:	Yes / No*
* If Female Un-spayed, Date o Cycle			
Weight Colou	ır Spe	cial Markings?	
How does your dog get along v	with other dogs?		
People?			
Under what conditions does yo	our dog growl, snarl, ba	ark or cry?	
Has your dog ever bitten or bed	en bitten?		
Has your dog used any daycare	e/boarding facility befo	ore? Yes	* / No
* If yes, where?			

Tell Us About Your Pet's Health

Veterinarian: Dr	at	Clinic/Hospital
Address		
Phone Number		
Please describe your pet's general he	ealth (Include any current med	ical conditions)
Allergies (If any)		
Current Medications		
Frequency & Time Administered		
Date of Last Complete Physical Example 1		
Vaccinations Record (Fill in yourself be completed 4 days prior to check-i	<u> </u>	s a copy). Vaccinations must
DA2PP is a multivalent vaccine for a 2, parainfluenza, canine parvovirus,		ne distemper, adenovirus type
RABIES protects against the rabies v	virus.	
BORDETELLA / Canine Cough.		
We highly recommend Advantage of through late fall.	r Advantix not a must. Please	apply during the springtime

Tell Us About Your Pet's Daily Routine

Regular Food: Brand	Variety	Feed Times		
Quantity Ins	truction			
Exercise/Walk	Times			
Favourite Activities/Toys/Buzz	Words			
Items Brought/Luggage				
Agreement				
pet and sign this form. I authorize Go temperament and vaccinations. I give my expense, should Gone Wild Kenne charges at checkout, unless previously any liability or claim due to injury or or	ne Wild Kennels to contact my consent to Gone Wild Kennels els deem it necessary. I have re arranged. I release Gone Wild death of my dog, unless Gone V recumstances will Gone Wild K	ned pet, and that I am authorized to board the veterinarian in order to confirm health, to act on my behalf to obtain veterinary care at ad this schedule of fees and agree to pay all I Kennels (and its agents and employees) from Vild Kennels has been negligent in the care of ennels be liable for consequential damages or		
Signed	Date			