

## Dog Services Application

Please provide proof of current Rabies, Distemper/Parvo & Bordetella vaccines. Suite Paws must have proof of vaccines BEFORE boarding any dog. No exceptions.

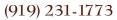
Date: / /			
CLIENT INFORMATI	ON		
Name:			
Address:			
City:		State	e: Zip:
Home phone:	Work phone:	Cell	phone:
Email:			
Emergency contact name as	nd phone:		
Who else has permission to	pick up your pet from us? Contac	et name and phone:	
GUEST DOG INFOR			
Dog Name:	Approx. weight:		
Age:	Breed:	Color:	Sex:
Is your pet spayed or neuter	ed? 🗖 Yes 🗖 No		
Any animal	Your pet needs to be on a fle found to have fleas will be g	-	
How did you hear about Sui	te Paws Pet Resort & Spa?		
Are you interested in using	our Pick Up/Drop Off Service?		☐ Yes ☐ No

## GENERAL HISTORY

How long have you had your dog and where did you get him/her?		
MEDICAL HISTORY		
Any previous serious illnesses or surgeries?	☐ Yes ☐ No	
If yes, please describe:		
Any pre-existing medical conditions?	☐ Yes ☐ No	
If yes, please describe:		
Any allergies of which you are aware?	☐ Yes ☐ No	
If yes, please describe:		
Does your dog need to be given medication while being boarded? *	☐ Yes ☐ No	
If yes, please list specific instructions:		
* There will be a \$1 per night fee for administering medication and insulin. Medications must be in a prescription bottle.	d a \$3 per night fee for	administering
VETERINARIAN INFORMATION		
Name of Animal Hospital:		
Address:		
City:	State:	Zip:
Phone:		











## **FEEDING**

Please bring in his/her food in a ziplock bag or airtight container. Clearly label with the first and last name of your dog. If you forget to bring your dog's food or choose to use our premium food while your pet stays with us, there will be a \$2/night charge. For more information, please refer to the Boarding Checklist.

Does your dog have special feeding requirements?	☐ Yes ☐ No	
If yes, please list specific instructions:		
Does your dog growl at you if you get near his/her food?	☐ Yes ☐ No	
Can you easily take your dog's food away while he/she is eating?	☐ Yes ☐ No	
BEHAVIOR		
Has your dog ever growled at another person or dog?	☐ Yes ☐ No	
If yes, please explain the circumstances:		
Has your dog ever bitten another person or dog?	☐ Yes ☐ No	
If yes, please explain the circumstances:		
Has your dog ever been bitten by another dog?	☐ Yes ☐ No	
If yes, please explain the circumstances:		
Does your dog seem frightened or uneasy around any type of person or situation?	☐ Yes ☐ No	
If yes, please describe:		
Is there anywhere on your dog's body that he/she does not like to be touched?	☐ Yes ☐ No	
If yes, please describe:		
Will your dog guard toys?	☐ Yes ☐ No	











Has your dog ever jumped a 5 foot fence or barrier?	☐ Yes ☐ No
If yes, please describe:	
Would you consider your dog an "Escape Artist"?	☐ Yes ☐ No
If you would like your dog to be involved in group play during boarding, y questions. Your dog will need a temperament test if he/she is new to our d six months MUST be spayed or neutered to join in group play.	
Can your dog swim?	☐ Yes ☐ No
Has your dog ever socialized with a large group of dogs (more than 6)?	□ Yes □ No
If yes, please describe:	
If your dog is over 40 lbs., has he/she ever played with small dogs (under 15 lbs)?	☐ Yes ☐ No
If yes, please describe:	
If your dog is under 15 lbs., has he/she ever played with larger dogs (over 40 lbs).	☐ Yes ☐ No
If yes, please describe:	
COMMENTS	
Please list anything else you would like us to know about our future guest:	
Please ask as staff member to provide a list of extra services that your dog	g can enjoy during his/her stay.









www.suitepaws.com

