



Full Registration Form

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Owner Information

Owner(s) Name _____ Home Phone # _____

Email Address _____ Cell Phone # _____

Address _____ City _____ State _____ Zip Code _____

How did you hear about Puppy Pitstop? _____

Emergency Contact Name _____ Phone # _____

Veterinarian Name _____ Phone # _____

Pet Information

Pet Name _____ Gender _____ Spayed/Neutered? _____

Breed _____ Color/Markings _____ Weight _____ Date of Birth _____

Dietary Information (Necessary for boarding)

You should plan to bring your pets food. If we run out/you fail to provide, a charge will be assessed. Food type/brand? _____

Feeding times? Circle all. Morning / Afternoon / Evenings / Anytime Amount per feeding? _____

Any special instructions? _____

Medical Information

List any known allergies _____ Medications _____ Medical/Physical disabilities _____

Social Profile

Where did you obtain your pet? _____ Personality? Calm / Playful/ Aggressive / High Energy

Situations which may stress your dog? _____

Situation which may stress unfriendly behavior? _____

House Trained? Yes / No Formal obedience training? Yes / No Crate trained? Yes / No Ever been boarded? Yes / No

Bitten another person? Yes / No Bitten another dog? Yes / No Has your dog ever been attacked? Yes / No

Any places your dog doesn't like to be handled? _____

Dog Behaviors

Jumping on people when they come over Yes/ No

Incessant barking Yes/No

Refuse to come when called Yes/No

Lunging/barking at other dogs Yes/No

Refusing to release toy or ball Yes/No

Activities your dog enjoys? Circle all that apply

playing fetch

swimming

sprinkler

agility equipment

walks/hikes

obedience