

WESTERGAARD KENNELS, INC.

BOARDING MENU and CUSTOMER INFORMATION

Customer's name(s) _____

Address _____

Phone #'s - Please provide as many numbers you would like us to have.

Email address(s) _____

Pet name(s) _____

Breed(s) _____

Pet color(s) _____

Pet gender(s) _____

Pet age(s) _____

Has your dog(s) been spayed or neutered ? _____

Has your dog(s) ever bitten anyone ? _____

Authorized to pickup (other than owner)

Veterinarian _____

Phone # _____

PLEASE ADD ANY ADDITIONAL INFORMATION BELOW THAT YOU WOULD LIKE US TO HAVE CONCERNING YOUR DOG. EMERGENCY CONTACTS, HEALTH/BEHAVIORAL , ISSUES, ETC...

PLAY TIME ? _____ OWN FOOD ? _____

MEDICATION ? _____ BATH ? _____

CUSTOMER SIGNATURE _____

DATE _____