

POOCH PALACE CUSTOMER INFORMATION

CONTACT INFORMATION

First: _____ Last: _____
Address: _____
City: _____ State: _____ Zip: _____
Home: _____ Cell: _____ Email: _____

POOCH INFORMATION

Pooch 1 Name: _____ Birth Date: _____
Breed: _____
Gender: _____ Spayed/Neutered (*required for dogs 6 months and older.*): _____
Aggressive? Fearful? Allergies? Please specify: _____

Feed*: _____ cups, _____ times per day. OK to have can food if not eating? _____

Pooch 2 Name: _____ Birth Date: _____
Breed: _____
Gender: _____ Spayed/Neutered (*required for dogs 6 months and older.*): _____
Aggressive? Fearful? Allergies? Please specify: _____

Feed*: _____ cups, _____ times per day. OK to have can food if not eating? _____

** If you do not bring your own food we will feed your dog with our own house food. There will be an additional charge of \$3 per meal for dogs over 30 lbs and \$2 for dogs 30 lbs and under, per day.*

VET INFORMATION

Name: _____
City: _____ State: _____ Phone: _____

Your dog's vaccination will need to be up to date for Distemper (DHPP), Kennel Cough (Bordetella) and Rabies. We require a Kennel Cough Booster every 6 months.

Bring your records with you or have your vet fax them to Pooch Palace at (843) 856-2224.

COMMENTS

How did you hear about us? _____