



47 Waibel Road
Port Deposit, MD 21904-1115



Ph: (443) 485 – 0765
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DOG INFORMATION

PLEASE REMEMBER TO BRING, FAX, OR EMAIL SHOT RECORDS WITH EACH VISIT.

DOG'S INFORMATION

Name:					
Breed:			Birthday:		
Color:			Markings:		
Sex:	Male	Female	Neutered/Spayed?	Yes	No

FOOD/WATER

Do you feed dry food?	Yes	No	If yes, how much:		
How often per day?	1 time/day	2 times/day	3 times/day	Other:	
Do you feed wet food?	Yes	No	If yes, how much:		
How often per day?	1 time/day	2 times/day	3 times/day	Other:	
Any water restrictions?					
Any food allergies?					

OTHER

Please list basic commands that your dog knows:					
Is your dog:					
Friendly with other dogs?	Yes	No	Allowed in the house?	Yes	No
Friendly with new adults?	Yes	No	Allowed to have treats?	Yes	No
Friendly with children?	Yes	No	Prone to digging?	Yes	No
Prone to chewing?	Yes	No	Fearful of noises or other things?	Yes	No
Has bitten other people or dogs?	Yes	No	Has shown aggression?	Yes	No
Please indicate anything else about your dog's behavior that would be useful to us in providing care:					

