



Care-A-Lot
PET RESORTS

Your pets are our babies too.®

New Client Application - Dog

Owner Information

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

- Yes, please add me to your email list so that I may receive monthly specials for Care-A-Lot Pet Resorts
- No, I do not wish to receive emails from Care-A-Lot Pet Resorts

How did you hear about us?

- Person:* _____ (ex. Friend, Family, Co-worker, Employee, etc.)
**Please tell us if this person is an existing client so we may give them a gift of 1 free day of daycare!*
- Business: _____ (ex. Trainer, Groomer, Breeder, Rescue, Care-A-Lot, etc.)
- Media: _____ (ex. Billboard, Banner, Advertisement, etc.)
- Information: _____ (ex. Yellow Pages, Website, Internet, etc.)
- Other: _____ (ex. Drive-by, etc.)

Emergency Contact (Someone Other Than Yourself)

Name: _____

Phone: _____

Veterinarian

Name: _____

Phone: _____

Pet Information

Pet Name: _____ Breed: _____

Color: _____ Sex: Male Female Spayed/Neutered: Yes No

Age: _____ Birthday: _____ Weight: _____

Vaccination Expiration Dates

DHPP: _____ Rabies: _____ Bordatella: _____ Fecal: _____

Office Use Only

Please Initial

Entered: _____ Check: _____ Name Tag: _____