



Arlington Dog House, LLC

213 S. Arlington Heights Road 🐾 Arlington Heights, IL 60005
(847) 398-WOOF (9663) www.arlingtondoghouse.com
Daycare 🐾 Grooming 🐾 Boarding... All Under One Woof!

OWNER AND DOG INFORMATION

I understand that before my dog(s) can play or board at the Arlington Dog House the following requirements must be met:

- My dog must pass a temperament test to ensure s/he is not aggressive toward people or other dogs
- My dog's complete veterinary inoculation records must be furnished to Arlington Dog House including rabies, and distemper.
- My dog must be spayed or neutered unless they are younger than 6 months old.
- My dog must be on regular flea/tick and heartworm preventative programs for admission to ADH.

Signature

Date

Owner Contact Information

First Name: _____ Last Name: _____

Spouse/Partner First Name: _____ Last Name: _____

Address: _____ Unit/Apt: _____

City, State, ZIP: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Spouse/Partner:

Work Phone: _____ Cell Phone: _____

How'd you hear about us? _____

Emergency Contact

Name: _____ Relationship: _____

Phone Number(s): _____

Veterinary Information:

Primary Clinic: _____ Doctor: _____

Address: _____ City, State, ZIP: _____

Phone Number: _____

Other People Authorized To Pick Up My Dog(s):

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Dogs Information

Name: _____ Gender: Female Male

Breed: _____ Color/Markings: _____

Weight: _____ Birthday/Adoption Date: ____/____/____

Spayed/Neutered? Yes No If no, surgery is scheduled for: _____

Other Important Information:

My dog(s) has a pre-existing physical/medical condition (i.e. injuries, scars, sensitive stomach): Yes No

(If yes, please explain) _____

My dog is on medication: Yes No Dosage (amount and frequency): _____

Name: _____ Condition/Reason: _____

Any past injuries or current conditions? _____

Food your dog receives (amount and frequency): _____

Special Notes/Instructions: _____

My dog attended obedience training: Yes No If yes, where? _____

Known commands: _____

Nicknames your dog responds to: _____

Please rate your dog's energy level from 1 (very laid back) to 10 (always in motion): _____

How does your dog react to strangers?: _____

My dog has been boarded before: Yes No My dog has been to doggy day care before: Yes No

My dog has been groomed before: Yes No Sensitive areas on the body: _____

My dog has never bitten or attacked another person: Yes No

My dog has been in a crate/kennel before: Yes No My dog is comfortable in a crate/kennel: Yes No

Please check any applicable behaviors:

Excessive Barking

Separation Anxiety

Jumper

Digger

Excessive Marking

Aggressive

Climber

Biter

Excessive Mounting

Food Possessive

People Possessive

Stool Eater

Shy/Submissive

Toy Possessive

Picky Eater

Anything else you'd like us to know about your dog? _____
