

Canine Clubhouse

7501 Linglestown Rd, Harrisburg, PA 17112 - 717-614-1513 240 Silver Spring Road, Mechanicsburg, PA 17050 - 717-795-4118 info@canine-clubhouse.com

		Enrollment F	orm		
Owner Information:					
Name:	Ce	ell Phone:			
Address:		AI	t Phone:		
		E-	mail:		
Emergency Contact:					
Name:		Pł	none:		
Pet Information:					
-	Canine Clubhouse?				-
Dog's Name:		Age:	Sex:	Weight:	-
Type of Dog:		Spayed/N	eutered: YES	NO	
Can your dog have treats	s? YES NO				
If no, why not?					
Health and Grooming:					
Does your dog have aller	rgies? YES NO				
If yes, what kind	d of allergies?				
Does your dog have sens	sitive spots? YES NO				
If yes, where? _					_
What flea/tick treatment is	is your dog on?				_
Is your dog on any medic	cation(s)? YES NO				
If yes, what type and dos	age?				_
Any other health issues w	we should know about?				
					_
Pobavior:					
<u>Behavior</u> : How does your dog react	t to strangers (needle)?				
TIOW DOES your dog react	t to strangers (people)?				
Has your dog ever jumpe	ed a fence? YES NO				-
, , , , ,	was the fence?				
Has your dog ever showr					_
Dogs? YES	NO Explain:				
People? YES	NO Explain:				
Food? YES	NO Explain:				
				-	
Toys? YES	NO Explain:				