



Thank you for your interest in Puptown Charlotte! We look forward to spending time with your dog and learning more about your dog's unique personality. Once you complete this form, your dog's Pup Preview day can begin!

Pup Parent's Information

<p>Pup Parent's Name: _____</p> <p>Phone 1: _____ <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home</p> <p>Phone 2: _____ <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home</p> <p>Phone 3: _____ <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home</p> <p>Email: _____</p> <p>Address (please remember to include apartment number!): _____ _____</p> <p>Emergency Contact Person: _____</p> <p>Relationship: _____</p> <p>Phone 1: _____ <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home</p> <p>Phone 2: _____ <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home</p> <p>Email: _____</p> <p>Please list ALL people with permission to pick up your dog: _____ _____</p> <p>How did you first hear about Puptown Charlotte? _____ _____</p>	<p>Additional Notes:</p>
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## Pup's Information and Preferences

Pup's Name: \_\_\_\_\_

Breed / Color: \_\_\_\_\_

Age: \_\_\_\_\_

Sex:  Female  Male  Spayed / Neutered (>7 months)

Veterinarian (practice): \_\_\_\_\_

Veterinarian (specific doctor): \_\_\_\_\_

**Additional Notes:**

Vaccination	Date Given	Date Expires
Bordetella		
DHLPP		
Rabies		

Important medical history, allergies, or major surgeries: \_\_\_\_\_

Is your dog crate trained?  Yes  No

Has your dog received formal obedience training?  Yes  No

Does your dog eat lunch or a snack during the day?  Yes  No

Is your dog allergic to any type of shampoo?  Yes  No

Does your dog suffer symptoms of separation anxiety?  Yes  No

Is your dog destructive when left alone?  Yes  No

Your dog prefers:  Pillow bed  Cot bed  Blanket  No bed

Your dog has been to:  Daycare  Boarding  Public Dog Park  Dog Bar - Noda

How frequently do you anticipate bringing your dog to daycare at Puptown Charlotte? \_\_\_\_\_

Please describe your expectations for your dog's experience at Puptown Charlotte: \_\_\_\_\_