

# Wiggly Tails, Inc.

- A Waggin' Good Time!

1915 Holste Road, Northbrook, IL 60062  
Phone: 847.272.4141 Fax: 847.272.4234  
www.wigglytails.com info@wigglytails.com



## Application

### Customer Info: (Please Print Clearly!)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone (who): \_\_\_\_\_

Cell Phone #1 (Who?): \_\_\_\_\_ Cell Phone #2 (who?): \_\_\_\_\_

Email Address: \_\_\_\_\_ (for our newsletter and updates!)

How did you hear about us? If referred, tell us who? \_\_\_\_\_

Emergency Contact #1: \_\_\_\_\_ Phone #1: \_\_\_\_\_

Relation to Owner: \_\_\_\_\_ Phone #2: \_\_\_\_\_

### Pet Info:

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Weight: \_\_\_\_\_

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

Sex: Male / Female \*Neutered/Spayed: Yes / No **Adult Females must be spayed!**

### Vet Info:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### Vaccinations:

Your dog must be current with these vaccinations/tests before attending Wiggly Tails

\*\*\*\*\*PLEASE FILL IN DATE OF LAST VACCINATION\*\*\*\*\*

1) Rabies \_\_\_\_\_ 2) DHLPP (Distemper) \_\_\_\_\_

3) Bordatella \_\_\_\_\_ 4) Fecal Exam \_\_\_\_\_

In addition we require your dog to be on both Heartworm Medication and Flea/Tick Prevention:

Heartworm Medication used: \_\_\_\_\_ Flea/Tick Prevention Method: \_\_\_\_\_

(Over)

## Pet Personality Profile:

How long have you owned your dog? \_\_\_\_\_ Where did you get your dog? \_\_\_\_\_

If adopted, do you have knowledge of your dog's past history? If yes, describe: \_\_\_\_\_

Does your dog like kids?: \_\_\_\_\_ Does your dog get along with other animals in your home? \_\_\_\_\_

Does your dog like to be brushed? \_\_\_\_\_ Does your dog like to play in pools or swim? \_\_\_\_\_

How does your dog react to a stranger coming into your home or yard? \_\_\_\_\_

Are there any kinds of **people or dogs** your dog automatically fears or dislikes? \_\_\_\_\_

How does your dog react to puppies? \_\_\_\_\_

Has your dog ever growled or shown aggression? \_\_\_\_\_ What were the circumstances? \_\_\_\_\_

Has your dog ever bitten a person or another dog? \_\_\_\_\_ What were the circumstances? \_\_\_\_\_

Has your dog ever jumped/climbed over a fence? \_\_\_\_\_ How high was the fence? \_\_\_\_\_

Are there any physical restrictions that need to be placed on your dog? \_\_\_\_\_

Does your dog take medication, if so what and why? \_\_\_\_\_

May we give your dog an occasional dog biscuit or similar treat? \_\_\_\_\_

Does your dog have any problems in the following areas? (Check all that apply)

Chewing \_\_\_ Nipping \_\_\_ Housetraining \_\_\_ Barking \_\_\_ Digging \_\_\_ Jumping \_\_\_

Has your dog had any formal obedience training? \_\_\_\_\_ If yes, with whom? \_\_\_\_\_

What commands does your dog know? \_\_\_\_\_

Is your dog crate trained? \_\_\_\_\_

Does your dog have any medical conditions we should know about? \_\_\_\_\_

Any other comments or things we should know about your dog?

What services are you planning on using? Daycare \_\_\_ Boarding \_\_\_ Grooming \_\_\_ Training \_\_\_