Coppinshill K9 Capers Booking Form

 ***Dog Walking Doggy Daycare Boarding Puppy Training Training*** Please Select

Owner Information

Title: ……………… First Name: ....................................................... Surname: .................................................................... Address: ................................................................................................................................ Postcode: …….................... Home Phone: .............................................................. Work Phone: ............................................................................... Mobile Phone: ............................................................. Email: ..........................................................................................

Emergency Contact

Title: ……………… First Name: ....................................................... Surname: .................................................................... Address: ................................................................................................................................ Postcode: …….................... Home Phone: .............................................................. Work Phone: ............................................................................... Mobile Phone: ............................................................. Email: ..........................................................................................

Pet Information

Name: .................................................. Breed: ........................................................................ DOB: …………………...……. Microchip No: ……………………………….………………………………………………………………………………………………………………………..…… Sex: …………………….. Neutered: ……………..… If no, and female, date next in season: ……………..……………………………..

Other pets from same household

Name: .................................................. Breed: ........................................................................ DOB: …………………...……. Microchip No: ……………………………….………………………………………………………………………………………………………………………..…… Sex: …………………….. Neutered: ……………..… If no, and female, date next in season: ……………..……………………………..

Name: .................................................. Breed: ........................................................................ DOB: …………………...……. Microchip No: ……………………………….………………………………………………………………………………………………………………………..…… Sex: …………………….. Neutered: ……………..… If no, and female, date next in season: ……………..……………………………..

Veterinary Information

Name of Veterinary Surgeon: ............................................................................................................................................ Address of Practice: ........................................................................................................................................................... Telephone Number: ......................................................... Out of Hours Tel. No: ........................................................... Insurance Company Name: …………………………………………………………………

Policy No: ………………………………………………………………….. Website: ……………………………………………….

Email: …………………………………………….…….. Tel No: …………………………………….

Training Requirements : ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

Health and Medication details (including restrictions on exercise) ……………………………………………………..................................................................................................................................... ............................................................................................................................................................................................ ............................................................................................................................................................................................ …………………………………………………………………………………………………………………………………………………………………………………….. ............................................................................................................................................................................................ ............................................................................................................................................................................................ ……………………………………………………………………………………………………………………………………………………………………………………..

Feeding/Treats Time of Feed/Treats: .........................................................................................................................................................

Type of food/Treats: .......................................................................................................................................................... ............................................................................................................................................................................................ ............................................................................................................................................................................................ Accommodation Where does the dog usually sleep? …………………………………………….....................................................................................

Blankets/toys when sleeping? …………………………………………………………………………………………………………………………………..… Could the dog sleep in same room with other dogs? ........................................................................................................ Special arrangements for sleeping/rest? ……………………………………………………………………………………………………………………… …………………………………………………………………………………………………………………………………………………………………………………….. …………………………………………………………………………………………………………………………………………………………………………………….. Toys/games the dog likes? ………………………………………………………………………..………………………………………………………………… …………………………………………………………………………………………………………………………………………………………………………………….. …………………………………………………………………………………………………………………………………………………………………………………….. ............................................................................................................................................................................................ ............................................................................................................................................................................................ Level of obedience and any command words that the dog responds to ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................

 Is the dog likely to:

 BE AGGRESSIVE WITH OTHER DOGS? OFTEN OCCASIONALLY NEVER

BE AGGRESSIVE WITH PEOPLE? OFTEN OCCASIONALLY NEVER

BE FEARFUL OF OHER DOGS? OFTEN OCCASIONALLY NEVER

BE FEARUL OF UNNOWN PEOPLE? OFTEN OCCASIONALLY NEVER

BARK? OFTEN OCCASIONALLY NEVER

CRY/WHINE? OFTEN OCCASIONALLY NEVER

CHEW OTHER THINGS? OFTEN OCCASIONALLY NEVER

DIG UP LAWNS/PLANTS? OFTEN OCCASIONALLY NEVER

JUMP UP AT PEOPLE? OFTEN OCCASIONALLY NEVER

PULL ON THE LEAD? OFTEN OCCASIONALLY NEVER

POSSESSIVE OVER FOOD, TOYS, CHEWS ETC? OFTEN OCCASIONALLY NEVER

TRY TO ESCAPE? OFTEN OCCASIONALLY NEVER

EAT THEIR OWN OR OTHER ANIMAL FAECES? OFTEN OCCASIONALLY NEVER

CHASE OTHER ANIMALS? OFTEN OCCASIONALLY NEVER

RECALLS? OFTEN OCCASIONALLY NEVER

Any other relevant or useful information ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................ ............................................................................................................................................................................................

 Booking Details

Days/Dates: ........................................................................................................................................................................ Arrival Time: ................................................................. Collection Time: ......................................................................... Payment: …………………………………………………………………. Payment due date: ………………………………………………………………..

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 I agree to the Terms and Conditions, Policies and Procedures and to pay the amount as detailed above.

Signed: ..................................................................................................................................... Date: .............................. Print Name: ………………………………………………………………………..………………………………………………….………………………………….