

NITRO K-9

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Customer Information Form

The following information must be completed and signed prior to enrollment at Nitro K-9.

Date: _____

New Customer/New Pet

Existing Customer/New Pet Existing Customer/Update

Owner Information

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____ Appt _____

Home Phone _____ Work Phone _____

Cell Phone _____ Driver's License _____

E-mail _____

Emergency Contact _____ Relationship _____

Home _____ Work _____ Cell _____

How did you hear about Nitro Dog? Friend Family Ad Veterinarian Other _____

Pet Information

Pet Name _____ Cat Dog Breed _____

Color _____ Sex: M F Neutered/Spayed: Y N

Date of Birth _____ Age _____ Weight _____

Identification: ID Tag # _____ Tattoo _____ Microchip _____

Required Vaccinations (Veterinarian Records Must Be Attached):

Dog: *DHPP (Distemper, Parvovirus), **Bordtella, *Rabies

Cat: *Feline Distemper (FVRCP), *Rabies

**1-year or 3-year vaccines accepted **Required every 6 months and given at least 14 days prior to attendance*

Veterinarian _____ Phone _____

Please List any Medical Conditions _____

Medication _____ Morning Afternoon Evening Quantity _____

Medication _____ Morning Afternoon Evening Quantity _____

Feedings: "Nitro Dog" Provided Food Client Provided Food

Morning Quantity _____ Special Instructions _____

Behavior Questions:

Please indicate any person, type of pet, or situation your pet seems to have a problem with: _____

Has your pet ever snapped at anyone? Yes No

Has your pet ever bitten or fought another animal? Yes No

Will your pet readily share toys with other animals? Yes No

Has your pet ever jumped a fence or barrier? Yes No

Are there any restrictions that should be placed on your pet's activities? Yes No

If yes, please explain: _____

Does your pet mark or spray inside the house? Yes No

Please share anything else we should know about your pet: _____

Behavior Questions (Dogs Only):

If your dog has shown any signs of aggression towards animals or people you will need to fill out our behavior assessment form before your dog is accepted into any of the Nitro K-9 programs.)

Behavior Questions (Cats Only):

Is your cat declawed? Yes No

Is your cat fully litter-box trained? Yes No

By signing the form Owner certifies to the accuracy of all information given about said pet on this contract and is the sole owner of the pet, free and clear of all liens and encumbrances.

Pet Owner Signature: _____ **Date:** _____

Pet Owner (Print Name): _____

Official Use Only

Nitro K-9 Representative (print name): _____

Nitro K-9 Representative signature: _____ Date: ___/___/___