



1162 Flight Way Drive P.O. Box 28497
DePere, WI 54115 Green Bay, WI 54324
920-337-WAGG (9244)
www.wagginn.com

Owner Information

Owners Name _____ Ph # (H) _____
Address _____ (W) _____
_____ (C) _____
Email Address _____

Pet(s) Information

| | |
|--|--|
| <i>First</i> | <i>Second</i> |
| Pets Name _____ | Pets Name _____ |
| Breed _____ | Breed _____ |
| Color _____ | Color _____ |
| Gender _____ Spay/Neuter _____ Age _____ | Gender _____ Spay/Neuter _____ Age _____ |

Feeding Instructions

| | |
|--------------------|--------------------|
| Type of Food _____ | Type of Food _____ |
| Quantity _____ | Quantity _____ |
| Frequency _____ | Frequency _____ |
| Comments _____ | |

Medication Requirements

(Please provide detailed information on any medical conditions your pet had/has)

Medication _____
Instructions _____
Frequency _____
Medical History (known allergies) _____
Restrictions _____

Veterinarian/Vaccination Information

Veterinarian (Clinic, Address, Ph #, Veterinarians name)

Shots: Rabies Date Given _____ Expires _____
Distemper Date Given _____ Expires _____
Bordetella Date Given _____ Expires _____

Flea Preventative: Frontline, Advantage, Sentinel, Top Spot, Revolution, Other _____ None

Emergency Contact _____ Ph _____ Relation _____
_____ Ph _____ Relation _____

Comments/Requests _____

Please initial indicating you read/understand: Pea gravel letter _____ Rules/Regulations _____