

CUSTOMER INFORMATION

ABOUT YOU

Title: _____ Owner's Surname: _____ First Name: _____

Home Tel Number: _____ Mobile Number: _____

2nd Mobile Number and Name: _____

Address: _____

Post Code: _____

Email: _____

UK Contact Name: _____

- Address: _____

- Number: _____

How did you hear about us? _____

THE DOG(S) (the most important of course!)

Dogs Name	Breed	Colour	D.O.B	Sex	Castrated / Spayed	Ongoing Medication
			/ /	M / F	YES / NO	YES / NO
			/ /	M / F	YES / NO	YES / NO
			/ /	M / F	YES / NO	YES / NO
			/ /	M / F	YES / NO	YES / NO

Registered Vets: _____

Sociability with people and other dogs:

What's your dog's most favourite thing to do?

CUSTOMER INFORMATION

Brand of food your dog is used to: _____

Any behavioural issues (i.e chewing bedding, can open doors, possessive etc.):

YES / NO if YES please explain below:

Any health issues (i.e allergies, sensitive stomach etc):

YES / NO if YES please explain below:

Are you happy for your dog to be socialised with other dogs while here at Bell Reed Kennels?

YES / NO

I have read this form and agreed to all the terms and conditions. I have filled out this form out to the best of my knowledge. I undertake to pay the boarding charges on arrival at the kennels.

Customer Signature: _____ Date: _____

2 OR MORE DOGS:

If boarding more than one dog and you wish for them to share, please sign below.

Customer Signature: _____ Date: _____