

	OWITE	i illiorillation	•		
Owner's Name:Home Add			dress:_		
ity:Zip Code					
Email Address:					
Home Phone:Work F			Cell Phone:		
	Contact	Phone Numbe	ers		
Emergency Contact Name			Phone		
Secondary Emergency Contact Name			Phone		
Other Contact Name			Phone		
In a medical emergency I preference —Please contact me first —Please only use my veterina —You may take my dog to the	arian		г арргу	,	
Pet Information					
Dog's Name	Age	Breed		Color	
Dog's Name	Age	Breed		Color	
Spayed/Neutered? □yes □no	Any other dogs/cat	s at home? □yes	□no	If yes, please list breeds and ages:	
Veterinarian	Animal Hospital				
Please read	all of the follow	ving, initial on	eacl	h line, then sign.	
·	•			ecause of this there are some risks. appearing healthy and being handled	

- 1. Transfer of a communicable illness such as, but not limited to, "canine cough", also known as the Bordatella virus (even with proper vaccination), "puppy warts" also known as canine papilloma virus, or parasites.
- 2. Injuries, usually benign, such as broken nails, sore pads, puncture wounds, abrasions and cuts.

with reasonable care, dogs are not always predictable. The following may result:

Continued on Other Side