

# **OVERDALE KENNEL**

**N8694 County Road B Spring Valley, WI 54767**

**Phone 715-495-3338**

**website: [overdalekennel.com](http://overdalekennel.com)**

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## **New Customer Packet**

Please complete the following questions to the best of your knowledge. Our goal is to provide a safe and enjoyable environment for all of our clients. This information will help us to maintain a safe and healthy environment for all of our clients and staff. Please help us to get to know both you and your pet.

- All dogs are required to be spayed or neutered unless they are under twelve (12) months of age. Intact dogs are welcome if they have received a title, are actively showing for a title, or have undergone formal training. Proof may be required. No dogs in heat are allowed.
- We require written proof of vaccinations from your vet.
- Flea & Tick Preventative and Heartworm Preventative are required year round.

Please be aware that dogs who are in group activities (i.e. daycare), may get scratched or bumped when playing with other dogs. Just like children on a playground, they may incur mild injuries or become dirty from running and wrestling with their canine friends. Please expect to see these types of things from time to time. Our staff will always be in attendance, taking good care of your pet, and will make you aware of any active aggression; otherwise, do not be concerned by scratches.

## Client Information

### Owner Information One:

Last name \_\_\_\_\_ First Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

Overdale Kennel will not sell, release, or distribute any e-mail addresses

- I would like to receive e-mail confirmations and Overdale Kennel specials and updates
- I do not wish to receive e-mail confirmations or Overdale Kennel specials and updates.

### Owner Information Two (if applicable):

Last name \_\_\_\_\_ First Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

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### Emergency Contact Information (if owner one and owner two cannot be contacted):

Last name \_\_\_\_\_ First Name \_\_\_\_\_  
Emergency Contact Phone Numbers: Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please list the name(s) of those authorized to drop-off/pick-up your pet:  
(We will only release your pet to the names listed below.) \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

I am interested in: Daycare Boarding Grooming Training

### Pet Profile

Please be honest when answering these questions. Answering "yes" does not automatically disqualify your dog.

Pet's Name \_\_\_\_\_ Call Name: \_\_\_\_\_  
Breed \_\_\_\_\_ Age \_\_\_\_\_ Please Circle: Male Female

Is dog spayed/neutered: Yes No

### List any allergies:

\_\_\_\_\_

Dog's Birth Date\_\_\_\_/\_\_\_\_/\_\_\_\_ Color\_\_\_\_\_

Weight\_\_\_\_\_Distinguishing marks\_\_\_\_\_

How long have you had your pet?\_\_\_\_\_

Has your dog ever been boarded before?\_\_\_\_\_

How was the experience?\_\_\_\_\_

Total number of people in your household\_\_\_\_\_ Adult males\_\_\_\_\_

Adult Females\_\_\_\_\_ Number of children/age\_\_\_\_\_

Has your dog had experience with children? Yes No Does your dog like children? Yes No

Are there other animals in your household? If yes, please describe (species, breed, age):\_\_\_\_\_

Describe how your dog gets along with other animals in your household:\_\_\_\_\_

Has your dog had any socialization with other dogs?\_\_\_\_\_

How does your dog react to small animals (i.e. squirrels, rabbits, small, furry, quick moving dogs, cats)?\_\_\_\_\_

Has your dog ever bitten a person? If yes, please describe the situation:\_\_\_\_\_

Has your dog ever bitten another dog? If yes, please describe:\_\_\_\_\_

Has your dog growled or snapped at another person? If yes, please describe:\_\_\_\_\_

How does your dog respond to other dogs approaching when you're out on a walk:\_\_\_\_\_

Is your dog fearful or reactive around certain types of dogs or people:\_\_\_\_\_

Other situations which provoke fear/anxiety (please describe):\_\_\_\_\_

Are there any other special needs, comments, or information about your pet that you feel might be helpful to for us to be aware of to make your pet's stay at Overdale Kennel the best it can possibly be?\_

Thank you for taking the time to fill out our enrollment packet. This comprehensive questionnaire helps us to take the best possible care of your pet, making his/her stay with us the most pleasant experience we can provide.

Pet Owner Signature\_\_\_\_\_ Date\_\_\_\_\_

Pet Owner Signature\_\_\_\_\_ Date\_\_\_\_\_