



MIDTOWN GROOM & BOARD

NEW CLIENT FORM

PLEASE FILL OUT A NEW FORM (FRONT AND BACK) FOR EACH PET IN HOUSEHOLD

IF YOU HAVE MULTIPLE PETS, FILL OUT THE FIRST FORM COMPLETELY. THEN, FOR ADDITIONAL PETS, GIVE LAST NAME AND FILL OUT FORM FROM "PETS NAME" ON. STAPLE.

DATE:

OWNER'S FIRST NAME:

LAST NAME:

Street:

City:

State:

Zip:

Email address:

Cell Phone:

Home Phone:

Work Phone:

Spouse Phone (name & number):

Emergency Contact, if other than spouse (name & number):

How Did You Hear About Us? (circle): Website Flyer Humane Society Drive-by

Advertisement Invisible Fence CitySearch Facebook Local Event:

Vet: Other Groom Shop: Midtown staff member: Consierge:

Friend: (please list First & Last name so that we can send them a coupon and our thanks):

Other:

Pet's Name: **Breed or Approximate Mix:**

Age (approx): **Weight:** **Birthday:**

Sex (circle): **Male** (NOT neutered) **Female** (NOT spayed) **Male** (Neutered) **Female** (Spayed)

**** Spay / Neuter is required for daycare and boarding. Not required for grooming.**

Color (circle): black white chocolate red golden grey brindle
tabby calico spotted

Other Color / Description:

Veterinary CLINIC: **Preferred Vet:** **Vet Phone:**

Dogs : Rabies (expires): **DHLPP (expires):** **Bordetella (expires):** **Lepto (expires):**

My DOG is an: indoor pet outdoor pet both

My DOG goes to a: dog park town lake ranch public parks agility training

Other public place:

Have you chosen to opt out of the Leptospirosis vaccination (dogs)? yes no

Reason for opting out:

** Midtown requires that a liability release be signed if your pet is not vaccinated for Leptospirosis. (we DO NOT make exceptions to any other canine vaccines)

Cats : Rabies (expires): **Feline Leukemia (expires):** **FVRCP (expires):**

My CAT is an: indoor pet outdoor pet both

Have you chosen to opt out of the Feline Leukemia vaccination (cats): yes no

Reason for opting out:

Cats that are NOT vaccinated for Fel. Leuk. must test negative: Test Date: Result:

** Midtown requires that a liability release be signed if your cat is NOT vaccinated for Feline Leukemia. (we DO NOT make exceptions to any other feline vaccines)

How old was your pet when you got him/her?						
Where did you get your Dog/Cat?						
Does your pet prefer women or men?	women	men	likes both	dislikes both		
Has your pet been socialized regularly with people?	yes	no	with dogs?	yes	no	
Has your Dog/Cat ever bitten a person?	yes	no				
Explain:						
Does your <u>DOG</u> LIKE other female dogs? male dogs?	female	male	likes both	neither		
Does your <u>DOG</u> prefer:	large dogs	small dogs	likes both	neither		
What is your <u>DOG's</u> play style?	calm	energetic	shy	frightened	aggressive	unknown
Has your <u>DOG</u> ever been in a fight and/or bitten another animal?	yes		no			
Explain:						
Has your Dog/Cat ever shown any signs of aggression toward humans and/or animals?	yes			no		
Explain:						
Has your PET ever had surgery? or been to the vet for a major medical reasons?	yes		no			
Explain:						
Does your Dog/Cat have any chronic health conditions and/or old injuries?	yes		no			
Explain (give symptoms and/or location of injury):						
Does your Dog/Cat have trouble with (circle those that apply):	stairs	being lifted	walking	frequent urination		
Does your Dog/Cat have a sensitive stomach?	yes	no				
** Due to allergies, Midtown does NOT give treats to our clients' pets. Boarding dogs may experience sensitive stomach due to the change in diet. Feel free to bring your own food if your pet is boarding. Portion accordingly (we recommend sandwich baggies)						
Does your Dog/Cat have any known allergies?	yes	no				
Explain:						
Is your <u>DOG</u> Crate trained?	yes	no	Leash trained:	yes	no	
Describe your <u>DOG's</u> crate style:	content	anxious	destructive	unknown		
Is your <u>DOG</u> (circle):	a digger	chewer/shredder	barker	fence climber	escape artist	
Climbers - type of fence:	height:					
Escape Artist - explain WHAT they get out of and HOW :						
Has your Dog/Cat ever been refused service at a grooming, daycare, boarding, or vet facility?	yes		no			
Explain circumstances (we do not need name of facility):						
Is your Dog/Cat sight or sound sensitive (thunderstorm, blow dryer, etc):	yes		no			
Explain:						
** In order to maintain a flea-free facility, Midtown immediately treats all pets found with fleas (at owner's expense).						
Circle the method of flea treatment your prefer:	Capstar (oral) \$8		Dip \$8 (in addition to bath price)			
Is your Dog/Cat on a regular flea regimen?	yes	no	Type:			
Is your Dog/Cat currently taking any medications?	yes	no				
List meds and conditions:						
Has your Dog/Cat ever had a seizure?	yes	no	approx date of last seizure:	frequency:		
What were the signs of the seizure? (because there are different types) :						
So that we can give TLC & spoil your pet, where (or how) does your pet love to be petted?						
Anything else we should know?						