



Phone: 308-252-1468
Cell- Call/Text: 308-520-8556

General Information Form

Please Return this from with updated shot records

Pet #1 Information: (please fill out this section for each pet)

Name: _____ Age: _____ DOB: _____ Weight: _____

Color/Markings: _____

Breed: _____ Allergies: _____

Male / Female (circle one)

Intact / Spayed / Neutered (circle one)

Pet #2 Information:

Name: _____ Age: _____ DOB: _____ Weight: _____

Color/Markings: _____

Breed: _____ Allergies: _____

Male / Female (circle one)

Intact / Spayed / Neutered (circle one)

Pet #3 Information:

Name: _____ Age: _____ DOB: _____ Weight: _____

Color/Markings: _____

Breed: _____ Allergies: _____

Male / Female (circle one)

Intact / Spayed / Neutered (circle one)

Owner Information:

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Email: _____

Persons authorized to pick up your pet(s): _____

How did you hear about Paws-a-Palooza? _____

Emergency Contact: (responsible for decisions if owner not available/Somone who usually doesn't go on out of town trips with you)

First Name: _____ Last Name: _____

Home Phone: _____ Cell: _____ Work: _____

Veterinarian: _____

For overnight Boarding:

How much and how often do you Feed them? _____

Day Camp / Boarding Questions:

1) Do you plan on using our day camp services? Y / N

If yes, how often might you use this service?

_____ Daily

_____ 1-2 times per week

_____ 3-4 times per week

If yes, how long, generally, would your pet be at day camp?

_____ 1-4 hours (half day)

_____ 4+ hours (whole day)

2) Do you plan on using our overnight boarding services? Y / N

If yes, would you be boarding more than 1 dog each time? Y / N

If yes, would you want all the dogs boarded in the same room? Y / N
currently use a dog boarding service?

How often do you

_____ Monthly

_____ 3-4 times a year

_____ 4+ times a year

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