



790 Buckeye Access Road • Swannanoa, NC 28778
(828) 299-9500

Additional Dogs Addendum

Dog 3
Name : _____ Breed: _____

Weight : _____ Color : _____ Birth-date : _____
 Male Female Spayed / Neutered

Dog 4
Name : _____ Breed: _____

Weight : _____ Color : _____ Birth-date : _____
 Male Female Spayed / Neutered

Dog 5
Name : _____ Breed: _____

Weight : _____ Color : _____ Birth-date : _____
 Male Female Spayed / Neutered

Dog 6
Name : _____ Breed: _____

Weight : _____ Color : _____ Birth-date : _____
 Male Female Spayed / Neutered

Veterinarian: _____

Please provide the following information for each dog listed above:

Method of flea control and heartworm prevention:

Is your dog housebroken? Yes No

Does your dog go to the dog park? Yes No

Has your dog ever bitten a person or another animal? Yes No Don't Know

If yes, please explain:

Has your dog ever exhibited aggressive behavior towards people or other animals? Yes No
 Don't Know



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If yes, please explain :

Has your dog ever been bitten or attacked by another dog? Yes No Don't Know

If Yes, please explain :

Has your dog ever escaped a fenced enclosure? Yes No Don't Know

If Yes, please explain :

Does your dog board well? Yes Never Boarded No Don't Know

If No, please explain:

Eating Habits: Eats all food at mealtime Nibbles throughout day
Goes for periods without eating Sometimes requires more palatable food to be
mixed in to eat Bolts food

In your opinion, is your dog: Underweight Ideal Weight Overweight

Please describe any medical or physical problems, including allergies:

Please list any special conditions regarding health, diet, and/or grooming (e.g. cut preferences or skin sensitivities):

Signature/Initials of Owner: _____ Date: _____

Addendum-03.23.2016