

## CONTACT information

### OWNER'S INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: (\_\_\_\_\_) \_\_\_\_\_  
Work Phone: (\_\_\_\_\_) \_\_\_\_\_

### VETERINARIAN'S INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_  
Emergency #: (\_\_\_\_\_) \_\_\_\_\_

### GROOMER'S INFORMATION

Name: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_  
Collar Size: \_\_\_\_\_  
Last Shampoo: \_\_\_\_\_  
Last Bath: \_\_\_\_\_  
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PET'S information

Name: \_\_\_\_\_  
Gender: \_\_\_\_\_

Spayed     Neutered

Breed: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
Registration#: \_\_\_\_\_  
Registered Name: \_\_\_\_\_  
Sire's Reg. #: \_\_\_\_\_  
Sire's Name: \_\_\_\_\_  
Sire's Breed: \_\_\_\_\_  
Dam's Reg. #: \_\_\_\_\_  
Dam's Name: \_\_\_\_\_  
Dam's Breed: \_\_\_\_\_

### PET'S IDENTIFICATION

Microchip ID Number: \_\_\_\_\_  
License Number: \_\_\_\_\_  
Collar Color: \_\_\_\_\_  
Identifying Markings: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SPECIAL MEDICAL INFORMATION

Diet: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Allergies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Medical Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DOG HEALTH RECORDS

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Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Breed: \_\_\_\_\_

Sex: \_\_\_\_\_

Markings: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

