

Senior Pet Questionnaire

Owner's Name:			Date:
Dog's Name:		Breed:	Age:
Has your pet stayed ove	ernight at a pet resor	rt/boarding facility/kennel Yes _	No
• If yes, please specify the	ne last dates your pe	t stayed there.	
Health History			
Has your pet ever been	diagnosed with an	y medical conditions? Yes	_ No
• If yes, please describe.	·		
Does your pet have any	history of injuries o	r illnesses? Yes No	-
• If yes, please describe.	·		
Has your net undergone a	any surgical or medica	I procedures that continue to affect	your pet's health? Yes No
Is your pet currently pre	scribed any medicat	ions and/or supplements? Yes _	No
• If yes, please complete	e the table below.		
Medication Name	Dosage	Frequency of Administration	Method of Administration (pill pockets, cheese, etc)
Lloolth Conditions			
Health Conditions	and as displace and	v of the following bealth condition	ne? (chack all that amply)
		y of the following health condition	
Hearing Loss Vision Loss		Difficulty Walking Up Stairs Difficulty Walking Down Stairs	Difficulty Chewing
Incontinence		, j	Difficulty Getting Up from the Floor
(accidents in the		Lumps or Bumps	

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Additional Information			
Please note anything else we should be aware of regardin	g your pet's behavior so we may better understand him/he		
(i.e. fears, quirks)			
Do you have any concerns about your pet staying over • If yes, please describe.			
It yes, please describe.			
digestive or heart problems. Senior Guests may require v	utines, which can be disrupted when staying at any sease and can potentially expose medical problems or of these health problems could include kidney, urinary, written approval from your veterinarian before checking the healthy enough for boarding and/or daycare. Red Dog		
You represent and warrant to Red Dog that all information provided to Red Dog in this Senior Questionnaire by you or on your behalf about the Guest is complete and accurate. If any of the information contained in this questionnaire changes between reservations at Red Dog, you agree to update Red Dog prior to the Guests arrival. Red Dog reserves the right to deny admittance to any Guest for any reason at any time. Including without limit injury, sickness, or behavior that, in the sole judgment of Red Dog, could jeopardize the health or safety of other Guests or the staff.			
Owner's Signature:	Date:		
Printed Name:	Guest Name:		