

K9 COUNTRY CLUB

New Customer Form



Owner's Name: _____ Dog's Name: _____

Address: _____

Email Address: _____

Home Ph: _____ Mobile Ph: _____

Dog's Breed: _____ Dog's Date of Birth: _____

Council of Registration (Circle one): Hlz / Wko / Waipa / MtaPiako Dog's Registration #: _____

Desexed: Yes / No Food Allergies or medication required: _____

Official basic obedience training? Yes / No If Yes, what length course? _____

History/origin of dog: (ie, SPCA, Breeder, Pet Store, any known background): _____

Other comments: _____

By signing this form, you, the owner of the above dog/s, confirm that you have read, fully understand, and agree to abide by all Terms & Conditions as per the "K9 Country Club Terms & Conditions" document presiding at the date of your signing this New Customer Form.

Signatory's name: _____

Signature: _____ Date: _____