

## CUSTOMER INFORMATION SHEET

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

Additional Parent: \_\_\_\_\_

Employer: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Home Phone:		Work Phone:		Cell Phone:	
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Best number to call to schedule tryout: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Who may we thank for referring us? \_\_\_\_\_

CREDIT CARD:  VISA  MASTERCARD  DISCOVER

NAME ON CARD: \_\_\_\_\_ NUMBER: \_\_\_\_\_ EXP: \_\_\_\_\_

Player's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Authorized to Pickup: \_\_\_\_\_

Birthday/Adoption Date: \_\_\_\_\_ Gender:  Male  Female

Neutered State:  Unaltered  Spayed  Neutered

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

Crate Trained?  YES  NO                      Microchip ID# \_\_\_\_\_

VET: \_\_\_\_\_ VET CLINIC: \_\_\_\_\_

VET PHONE: \_\_\_\_\_

Office Use Only:  
Admissions Test Scheduled For: \_\_\_\_\_ Employee I.D. \_\_\_\_\_ Date: \_\_\_\_\_  
Username (last name) \_\_\_\_\_ Password (last name area code) \_\_\_\_\_