



3016 Hill St., Los Angeles, CA 90007 ~ 545 S. Main St., Los Angeles, CA 90013
213-748-7485 ~ barkavela.com

REGISTRATION FORM

Owner Information:

Owner's Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Emergency Credit Card # (required): _____ -- _____ -- _____ -- _____

Exp: _____ Last 3 Digits on back of card: _____

Veterinarian Hospital: _____ Phone: _____

Who should we call to pick up your dog(s) if something should happen to you?

Name: _____ Phone: _____

In addition to yourself, name all who are authorized to pick up your dog:

How did you hear about Bark Ave?: _____

Pet Information

Name: _____

Breed: _____ Color: _____

Age: _____ Sex: _____ Weight: _____

Neutered/Spayed?: Yes / No

Birthday: _____

Allergies?: _____

2nd Pet

Name: _____

Breed: _____ Color: _____

Age: _____ Sex: _____ Weight: _____

Neutered/Spayed?: Yes/No

Birthday: _____

Allergies?: _____