



Greater Lincoln Obedience Club

Additional Dogs Information Sheet

Dog Information Sheet

Members Name: _____

Please provide information about each of your dogs that will be training at the Greater Lincoln Obedience Club

Dog's Name: _____ Breed: _____ Date of Birth/Current Age: _____

Current Shot Information: Rabies Parvovirus Coronavirus Adenovirus Distemper Parainfluenza

Veterinarian: _____ Contact Number: _____

Previous Training: _____

Special Needs or behaviors (ex. Epileptic, has shown aggression towards strangers, etc.)

Dog's Name: _____ Breed: _____ Date of Birth/Current Age: _____

Current Shot Information: Rabies Parvovirus Coronavirus Adenovirus Distemper Parainfluenza

Veterinarian: _____ Contact Number: _____

Previous Training: _____

Special Needs or behaviors (ex. Epileptic, has shown aggression towards strangers, etc.)

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Special Needs or behaviors (ex. Epileptic, has shown aggression towards strangers, etc.)

