



HPN Recipe Formulation Intake Form

Please fill this form out as completely as possible. Email drcutright@hpnvet.com or thebarkingcook@gmail.com with any questions.

Email address*:

Owner's Name*:

Phone Number*:

Dog's Name*:

Dog's Breed*:

Dog's Gender*: Male Female

Spayed/Neutered?*: Yes No

Dog's Age*:

Dog's Birthday*:

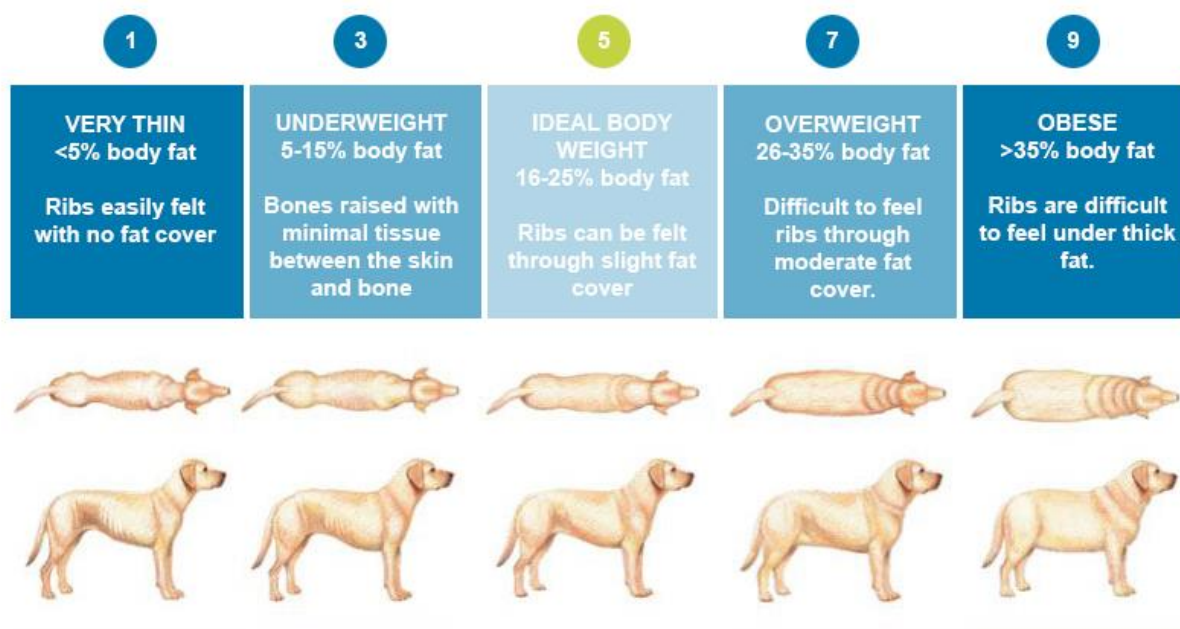
Dog's Weight*:

Dog's Lifestage*: Adult Senior

Dog's Activity Level*:

- Typical Adult (<3 hours per day)
- Active Adult (1-3 hours per day)
- Highly Active Adult (3-6 hours per day)
- Inactive Adult (<3 hours per day)
- Typical Senior (<3 hours per day)
- Inactive Senior (<3 hours per day)

Dog's Body Condition (see chart below)*:



- Very Thin
- Underweight
- Ideal
- Overweight
- Obese

Health Issues*: (Use the back of this sheet if you need more room)

Food Intolerances*

Food Preferences*:

Current Supplements (brands, doses, and frequency)*:

Doctor's recommendations, if any*:

Are you able to easily get 'exotic' proteins such as rabbit, goat, or venison if needed? *:

- Yes
- No
- Maybe

Would you like the recipe to be raw or cooked? *:

- Raw
- Cooked
- Open to either

Any other information that you think would be helpful in formulating a recipe for your dog?: