



COSMOPOLITAN CLUB
OF
COUNCIL BLUFFS

INFORMATION ABOUT DIABETIC ALERT DOG COMPANY / TRAINER

Company Name _____

Address _____

Phone # _____

Financial Information

Is Contract Signed Yes _____ No _____

Total Cost Of Dog \$ _____

Down Payment \$ _____

Balance Remaining \$ _____

Is There Other Forms of Payment by others i.e. Go Fund Me etc.

Who? _____

When is Estimated completion of Training Date _____

Signature _____ Date _____