

Application Form
Date

Owner Information

Name _____
Address _____
City _____
State _____
Zip _____
Home Phone: including area code _____
Work phone: including area code _____
Email Address: _____
Cell phone/pager: including area code _____

Emergency Contact
other than self

Name: _____
Phone: including area code _____

Pet Information

Pet name: _____
Breed: _____
Sex: Male Female
Age: _____
Weight: _____
Birthday: _____

Veterinarian Information

Name: _____
Address: _____
Phone: including area code _____

Pet Personality Profile

How did you hear about D.O.G.'s Daycare & Spa? _____

How long have you owned your dog? _____

Where did you get your dog? _____

If adopted, do you have knowledge of your dog's past history? Yes No

If yes, describe _____

Number of people in your household? _____

Adult male _____

Adult Females _____

Male children/ages _____

Female children/ages _____

Is your dog spayed/neutered Yes No

If yes, what age was this done? _____

List other animals in your household:

Species	Breed	Altered	Age	Sex

Describe how your dog gets along with other animals in your household? _____

How would you and your pet like to benefit from coming to daycare? _____

Pet Personality Profile: Health and Grooming

Does your dog have a problem with fleas? yes no

Does your dog have hip dysplasia? If yes, what restrictions need to be placed on your dog's activities or movements? yes no

Has your dog ever been hospitalized or had any serious health issues? yes no

Does your dog have allergies? yes no

Does your dog have any sensitive areas on his/her body? yes no

Pet Personality profile: Behavior

Do Visitors bring their dog(s) to your home? yes no

If yes, how does your dog react? _____

How does your dog react to a stranger coming into your home or yard? _____

Are there any kinds of people your dog automatically fears or dislikes? yes no

Are there any kinds of dogs your dog automatically fears or dislikes? yes no

What does your dog do when you are not at home? _____

Where does your dog sleep? _____

How does your dog react to other dogs approaching it when you are out on a walk? _____

On a lead:

Off lead:

Has your dog ever growled at someone? yes no

What were the circumstances? _____

Has your dog ever bitten someone? yes no

What were the circumstances? _____

Has your dog ever climbed or jumped over a fence? yes no

How high was it? _____

Does your dog have nay problems in the following areas? If yes, describe? _____

- Housetraining _____
- Barking _____
- Digging _____
- Ignoring _____
- Jumping _____

Is your dog frightened or nervous by anything? yes no

Has your dog ever growled or snapped at anyone taking food or toys away? yes no

Has your dog ever shared his/her food or toys with other animals? yes no

Does your dog play with other dogs? yes no

Please describe

Does your dog prefer to play with large or small dogs?

Is your dog crate-trained? yes no

What brand of food does your dog eat, and how much?

Has your dog ever had any formal obedience training? yes no

If yes, when and where?

What commands does your dog know? _____

What is your dog's bathroom command? _____

Other comments or information about your dog that you feel might be helpful: _____