



# Dog Boarding & Daycare Application



## OWNER'S INFORMATION

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone No.( ) \_\_\_\_\_ Cell No.1( ) \_\_\_\_\_

Work No.( ) \_\_\_\_\_ Cell No.2( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

How did you hear about us: \_\_\_\_\_

## EMERGENCY CONTACT

*Please provide the name(s) of someone not traveling with you.*

Name(s): \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone No.( ) \_\_\_\_\_ Cell No.1( ) \_\_\_\_\_

Work No.( ) \_\_\_\_\_ Cell No.2( ) \_\_\_\_\_

I authorized: \_\_\_\_\_ to Drop Off and/Pick Up My dog(s) on my behalf.

## VETERINARIAN HOSPITAL INFORMATION

*Vaccinations: Owner is required to provide veterinary proof of current Bordetella(kennel cough), Rabies, and Distemper.*

Vet Hospital: \_\_\_\_\_ Phone No ( ) \_\_\_\_\_ Fax No ( ) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## DOG INFORMATION

Dog's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Weight: \_\_\_\_\_

Breed: \_\_\_\_\_ Size: Toy / Small / Medium / Large / Giant Color: \_\_\_\_\_

Sex: Male (Neutered) Female (Spayed) / **Required at 6+ months.** How did you acquired your dog: \_\_\_\_\_

Have you ever used Doggy Day Care or Boarding services?: Y / N Please list: \_\_\_\_\_

Are there any parts of your dog's body he/she Does Not like to be touched? Y / N Please describe: \_\_\_\_\_

Has your dog ever played/socialized with 8 dogs or more?: Y / N Please describe: \_\_\_\_\_

Are there any restrictions that should be placed on your dog's activities or movements? Y / N  
Please describe: \_\_\_\_\_

Does your dog have any allergies or special conditions? Y / N Please describe: \_\_\_\_\_

Does your dog have a special tendency, fear or problems while using Day Care or Boarding services? Y / N (ie. Thunderstorms, anxiety, etc)  
Please describe: \_\_\_\_\_

Does your dog take medication: Y / N Please indicated dosage, times and time to administer

MED: \_\_\_\_\_ Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening \_\_\_\_\_ Dosage: \_\_\_\_\_

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## FEEDING INSTRUCTIONS

Brand Name	Quantity			Other
	AM	Noon	PM	

I \_\_\_\_\_, have read and understand all rules and regulations stated in this agreement and agree to abide by all rules, regulations, conditions, and statements of this agreement.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

A Dog's Dream Representative: \_\_\_\_\_ Date: \_\_\_\_\_