



{ THE CITY DOG }™

Doggie Daycare for the Urban Canine  daycare • boarding • grooming

Client Profile

Owner Information

Owner Name: _____

Mailing Address: _____

Owner Telephone: _____ Cell Phone: _____

Email: _____

Pet Information

Dog's Name: _____ Dog's Birthday: _____ Dog's Age: _____

Dog's Color: _____ Dogs' Breed: _____ Dog's Weight: _____

Dog's Sex: _____ Spayed/Neutered: _____

Veterinarian Information

Veterinarian Name: _____

Veterinarian Address: _____

Veterinarian Telephone Numbers: _____

Vaccination expirations: Rabies _____ Bordatella _____ DHLPP _____

Emergency Contact

Local Emergency Contact: _____ Phone: _____

Authorized Contact for pick up: _____

Contact Phone: _____

Feeding

Times Per Day: Morning _____ Afternoon _____ Evening _____ Qty per Feeding: _____

Brand of Food: _____ Can your dog have treats? _____

If my pet will not eat, it is ok to supplement their food with canned food, chicken broth or cheese? Yes or No

Special Feeding Preparations: _____

Medical

Does your dog take any medications? Yes or No

If yes, please list the medications or care requirements and possible side effects:

Is your dog allergic to any medications? Yes or No

If yes, please list the medications:

Does your dog have any injuries or chronic health problems? Yes or No

If yes, please explain:

Behavior

How would you describe your dog's activity level? Low/Average/High

My dog plays best with ___big dogs ___little dogs ___older dogs ___young dogs ___all

My dog is ___shy ___mellow ___aggressive ___excitable ___active ___a couch potato

My dog is easily scared by:

Are there any special commands we should use with your dog?

Has your dog ever bitten a person? Yes or No

If yes, please explain

Has your dog ever bitten another dog or acted unfriendly towards another dog? Yes or No

Have you boarded your dog before? Yes or No

Is your dog house trained? Yes or No

Does your dog have a tendency to chew things (beds, toys etc) Yes or No

Have you participated in any type of formal obedience training with your dog? Yes or No

Does your dog try to escape enclosures or jump fences? Yes or No

List any other special care or boarding requirements to be provided by The City Dog:

The City Dog

Date

Owner Signature

Date

Please fax current vaccination records for each dog to 614.228-3647
Dogs cannot be boarded or be in daycare without these records.
Thank you in advance!

As a condition of using The City Dog for your pets, the following Waiver & Assumption to Hold Harmless must be signed:

By choosing to utilize the services, participate in activities, groom or board my dog(s) at The City Dog, I agree to the following:

- I agree to pay the rates that are in effect at the time my dog is at The City Dog. I am aware that extra charges may be incurred and I agree to pay them at the time of pick-up. Examples include, but are not limited to: Daycare, boarding, grooming.
- I understand that that the hours of operation at The City Dog are 7am-7pm Monday through Friday for Daycare. If my dog is not picked up by the time the employees leave the facility, my dog will be fed and boarded for the night. I understand I will be charged for overnight boarding based on posted rates and if I have purchased a prepaid package, the cost will be deducted from my balance.
- All fees must be paid upon picking up your dog at the end of its stay, provided that The City Dog may in its discretion invoice Owner separately for such fees. Unless invoiced, Owner understands the dog will not leave The City Dog until all fees are paid by Owner. The City Dog will charge \$25 handling fee for all returned checks.
- If my dog participates in daycare, I understand that an interactive play setting is not without risk of injury, and that despite all of the participating dog(s) appearing healthy and being handled with care, my dog could inflict or suffer injury to/from another dog.
- I understand that I am liable for any medical care expenses and damages that result from injuries caused by my dog.
- If any medical problems develop while my dog is in the care of The City Dog, I authorize The City Dog to do whatever they deem necessary for the safety, health and well being of my dog. Further I agree to assume full financial responsibility for any and all expenses incurred. See attached vet release form.
- During the time that the dog is in the custody of The City Dog or on The City Dog premises, The City Dog shall not be liable for any sickness, disease, theft, death or injury of any kind which may be suffered by the dog unless due to the gross negligence or willful misconduct of The City Dog. I expressly waive and relinquish any and all claims against The City Dog, its employees and representatives, except those arising from negligence on the part of The City Dog.
- I acknowledge and am aware that vaccines do not protect against all communicable illnesses that may affect a dog. I confirm that my dog(s) have not been exposed to any contagious diseases within the past thirty days and I certify that my dog is in good health and is up to date on all vaccinations (Bordetella, Rabies, Distemper), is on flea medication and has had a Heartworm Test in the past year.

I have read all of the above and agree to comply:

Print Name:

My dog's Name:

Signature

Date