

APPLICATION FORM

OWNER INFORMATION

Name (Please list all Parents) _____

Address _____ City _____ Zip _____

Cell Phone _____ Work _____ Cell _____

E-Mail Address _____

Emergency Contact Name _____ Number _____

Who is authorized to pick up your dog from daycare? _____

How did you hear about us: _____

VETERINARY INFORMATION

Name _____

Address _____

Phone _____

Please check if your dog has had the following vaccination:

Rabies _____ DHLPP _____ Bordetella _____

Yearly Heartworm Test? YES NO If yes what brand _____

Flea Control Medication? YES NO If yes what brand _____

Describe any medical/health issues we need to be aware of:

I authorize Dogs and the City, Daycare & Spa to act as my agent in the event of my dog needing medical attention. I further agree that I will be responsible for any and all cost of any veterinary care deemed necessary by the licensed veterinarian.

Signature _____

Date _____

DOG'S INFORMATION

Dog's Name _____

Gender _____ Breed _____ Color _____

Weight _____ Birthday _____ Age _____

Is your pet Spayed or Neutered? YES NO

Are there any other animals in your household? (List type, sex, and age)

Has your dog ever been to a dog park? YES NO How did they behave?

Has your dog ever been to a daycare? YES NO Where? How did they do?

Is your dog social with humans and/or dogs?

Has your dog ever been boarded before? YES NO How did they do?

Does your dog have any allergies?

Does your dog have any health problems that require special attention?

Does your dog have any past injuries or any current conditions?

My dog needs medications YES NO

Type _____

Reason _____

Frequency _____

Amount _____

My dog will need breakfast/lunch/dinner YES NO (Owner must provide food)

Amount per feeding

May we give your dog our treats while he/she is at daycare? YES NO

Has your dog had obedience training? YES NO

What commands does your dog know?

My dog is house broken YES NO

Does your dog prefer to play with any specific breed or size of dog?
Male/female?

My dog's favorite toy/activity/treats:

Rate your dog's energy level (1 is very mellow & 10 is high energy)

Is your dog aggressive on leash? YES NO Off leash? YES NO

Has your dog ever bitten anybody? (If so please explain) YES NO

Is your dog afraid of any specific thing, (human or dog?)

Does your dog dislike any specific thing, (human or dog?)

Will you allow your dog to rest on the furniture while he/she is at daycare?
YES NO

Is your dog mouthy or does he/she nibble on you?

Is there anything your dog should not have?

Does your dog have problems in any of the following areas?

- JUMPING
- EATING FOREIGN OBJECTS
- ESCAPING
- SEPARATION ANXIETY
- BARKING
- FOOD OR TOY AGGRESSION/POSSESSIVENESS
- OTHER _____

Any other information that would be helpful?

Reason for using a daycare service

I understand that Dogs and the City, Daycare & Spa will use a choke chain for dog walks or I will provide a harness to be used on my pet.

Signature _____ Date _____

REQUIREMENTS

Behavior: All dogs must be friendly towards other dogs and people. They must not be food or toy protective. Owners will certify that their dog (s) have not harmed or shown aggression towards any person or dogs. Keep in mind, although it is supervised play, your dog still might acquire an occasional nip or scratch.

Vaccinations: All dogs must be current on their vaccinations. Owners must submit written proof of current DHLPP, Rabies, and Bordetella vaccinations. Dogs must also be on a heartworm, flea and tick program. If, at any time during care, a dog is noticed to have fleas or ticks, owner will be notified and a flea bath may be requested at owner's expense.

Health: All dogs must be in general good health and free of any contagious diseases which could potentially transmit to other guests. Dogs that have been ill with a communicable condition in the last 30 days will require veterinarian certification of health to be admitted or readmitted.

Age: Puppies are invited to participate in daycare providing proof of second set of shots (Bordetella and DHLPP).

Spay/Neuter: All dogs older than 6 months must be spayed or neutered.

Reservations: Required. Preference will be given to dogs attending full time. Cancellations with less than 24 hour notice will result in owners being charged a full day's fee.

Application: All dogs must have a complete, up- to-date application on file. You can download our application materials directly from our website. Save time by printing and filling out these documents before you come visit us.

[View Available Downloads](#)

Interview: To be accepted all dogs must go through an interview. Interviews allow us to meet you and your dog and to find out how they will interact with other dogs in our daycare. Interviews are conducted Monday-Friday 10:00am-3:00pm, by appointment only. Please bring written proof of vaccination record with you.

Fees: Payment is due at time of pick up or at time of drop off. Cash, check or MasterCard/Visa/Discover/American Express is accepted. Pre-paid packages are non- refundable. Current credit card number, security code and expiration date must be on file at all times. Late fees will always be enforced.

We reserve the right to refuse a visit if your dog arrives without the previous conditions met. This type of environment may not be suitable for all dogs and we reserve the right not to admit dogs based on temperament and level of sociability. Dogs must enter and exit the building on a leash.

Parent's Signature _____

Date _____

OWNER AGREEMENT

1. I understand that if my dog has a history of aggression or biting, Dogs and the City, Daycare & Spa reserves the right to refuse service and that all bites will be reported to the local authorities as required by law.
2. I understand that I am responsible for any medical care expenses and damages that result from injuries caused by my dog while attending Dogs and the City, Daycare & Spa.
3. I waive and relinquish any and all claims against Dogs and the City, Daycare & Spa, its employees and representatives, except those arising from negligence on the part of Dogs and the City, Daycare & Spa.
4. I have disclosed to Dogs and the City, Daycare & Spa all known dangers associated with my dog.
5. I understand and agree that Dogs and the City, Daycare & Spa shall not be held responsible for any damage to my property, or that of others, caused by my dog during the period in which they are in its care.
6. I understand that under no circumstances will Dogs and the City, Daycare & Spa be liable for consequential damages or damages beyond the replacement value of my dog.
7. If any medical problems develop while my dog is in the care of Dogs and the City, Daycare & Spa, I authorize Dogs and the City, Daycare & Spa 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.
8. I understand that Dogs and the City, Daycare & Spa is a cage-free facility. I accept the risks involved and agree that Dogs and the City, Daycare & Spa is not liable for any injuries or illnesses resulting during my dog's visit.
9. I hereby declare to Dogs and the City, Daycare & Spa that I am the legal owner of my dog; that my dog has not been exposed to Distemper, Rabies, Giardia or Parvo within the last thirty days; that my dog has been vaccinated as indicated by records present; that my dog is currently and properly licensed; and that I have read this agreement in its entirety.
10. I understand that photographs or other graphic, sound, or other image, likeness, recording, etc., may be made of my dog (s) by Dogs and the City, Daycare & Spa and that such may be used for any purpose without compensation, and I release to Dogs and the City, Daycare & Spa all rights that I may possess or claim to such image, likeness, recording, etc.
11. I understand that Dogs and the City, Daycare & Spa walks all dogs on a choke chain unless otherwise requested and owner must provide a harness.
12. I agree to notify Dogs and the City, Daycare & Spa as soon as I know of any illnesses/conditions that my dog develops that may put other dogs/persons at risk.
13. I understand that if I choose to visit my dog (s) on the premises of Dogs and the City, that Dogs and the City is not liable for any injuries/damages I may suffer from my dog or any other dog.

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

Print Name

Signature

My Dog's Name

Date

FINANCIAL POLICY

1. I understand that payment is expected at the time of pick up. If I do not pay at the time of pick up or prior to drop off, I authorize Dogs and the City to charge my credit card on file.

2. I understand that the hours of operation are Monday-Thursday 6:30am-7:00pm, Friday 6:30 am- 7:30 pm, Saturday & Sunday 9:00am – 4:00pm. For every hour late after closing, there will be a \$10.00 late fee that will apply.

3. I authorize Dogs and the City to charge my credit card for any outstanding balance on my account.

4. I understand that I will be charged a \$25 fee for returned checks.

5. I understand that if an unpaid balance remains unpaid for 60 days or more, unless another arrangement is made, my account will be turned over to a collection agency and that as a result I will be liable for collection costs and attorney fees in addition to the unpaid balance.

6. I understand that holidays will require a 50% deposit prior to check-in date in order to secure and reserve my dog's space. I understand holiday reservations not cancelled 72 hours prior to arrival date will be subject to a non-refundable deposit. Holidays include the week of Thanksgiving and Christmas.

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

Print Name

Signature

My Dog's Name

Date

CREDIT CARD AUTHORIZATION

1.Type of Card _____ Visa _____ M/C _____ AMEX

Name as it appears on the card _____

Card Number _____ Exp. Date _____

Signature _____

Security Code: _____

2.Type of Card _____ Visa _____ M/C _____ AMEX

Name as it appears on the card _____

Card Number _____ Exp. Date _____

Signature _____

Security Code: _____