

Application for Services

Owner's Information

Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Work: _____ Cell: _____

Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Home Phone: _____ Work: _____ Cell: _____

How did you hear about A Dog's Life? _____

Dog's Information

Name: _____ Breed: _____

Color/Markings: _____ Age: _____ DOB: _____

Weight: _____ Female Male Spayed/Neutered Yes No

Has your dog been to daycare before? _____

Has your dog ever been denied daycare privileges? (If yes, please describe circumstances)

Feeding Instructions

Brand Name of Food: _____

Frequency and Amount: AM _____ cups Mid-day _____ cups PM _____ cups

Special Instructions (Allergies, add water or wet food, treats, etc.): _____

Health Information

Veterinary Clinic Name: _____ Phone: _____

Does your dog have any medical conditions (allergies, injuries, illness, etc.)? Yes No

If yes, please describe: _____

Is your dog currently on any medications? Yes No If yes, please list medication names, dosages, frequency and condition(s) being treated: _____

Personality Information (If the answer is yes to any of the following, please explain in space provided.)

Does your dog have any fears/phobias(specific items, animals, people, etc.)? Yes No

Has your dog ever shown aggression towards people or other dogs? Yes No

Has your dog ever bitten (broken skin or caused damage requiring medical care) a person, another dog or other animal? Yes No

Does your dog play well with:

Large dogs? Yes No Small dogs? Yes No Puppies? Yes No

Does your dog escape from crates, under/over fences, or like to run away? Yes No

Does your dog display any of the following behavior?

Separation Anxiety	_____	Eats Feces	_____	Possessive of Toys	_____
Excessive Barking	_____	Eats Rocks/Twigs	_____	Possessive of Food	_____
Fence Jumping	_____	Excessive Chewing	_____	Biting/Mouthy	_____

Please describe your dog's personality (shy, playful, high energy, dominant, submissive, etc.):

Is your dog crate trained? Yes No

Does your dog know any of the following commands?

Sit	_____	Stay	_____	Leave It	_____
Down	_____	Wait	_____	Drop It	_____

Any other commands? _____

Is there anything else we should know about your dog?



Policies, Procedures, and Important Information

Paperwork: All dogs must have a completed application and signed waiver on file as well as proof from a Veterinarian of all required vaccinations and treatments. ADL also requires that every dog complete a temperament test with one of our staff members. Temperament tests are by appointment only and there is a \$20 evaluation fee. This fee will be credited toward any daycare package purchased within 30 days of the evaluation.

Safety: A Dog's Life requires that all dogs participating in daycare must be brought into the building on a leash, be under the owner's control until an ADL employee retrieves your dog, and also must be wearing a quick release collar with a nametag. No harnesses, martingale, pinch, choke, or buckle collars will be allowed in the daycare play areas. You are welcome to bring your dog in on whatever type of leash, harness or collar you would like, however your dog must also have a quick release collar with nametag.

Health: All dogs must be healthy, free of fleas and communicable illnesses, have a current Veterinarian, be up to date on all vaccinations (Rabies, DHPP, and Bordetella), have a current fecal (within the last 6 months), and be on some form of flea prevention (Frontline, Sentinel, etc.) We will not accept any animals with contagious conditions. Any dogs found to have a communicable disease must have a Veterinarian's note stating that the condition has been treated and that the pet is no longer contagious. ADL reserves the right to require a health exam for any dogs showing symptoms such as diarrhea, vomiting, coughing, sneezing, or any other signs of illness or injury.

Behavior: A Dog's Life does not accept aggressive animals and reserves the right to remove any animals which may become aggressive from the daycare area. ADL also reserves the right to remove dogs from the daycare area for other behavioral issues including excessive barking, eating of feces, lack of response to corrections and any other behaviors which we deem to be a potential safety issue.

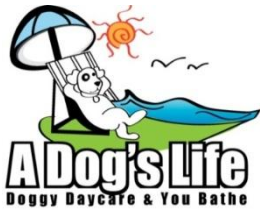
Payments: ADL accepts cash and credit cards (VISA and MasterCard) for services rendered. We require that a credit card be kept on file for all boarding appointments and for monthly pass subscriptions. We reserve the right to make charges on the card for medical emergencies and any services rendered if payment is not made in a timely manner.

Personal Belongings: ADL welcomes you to bring up to three (3) personal items with your dog during an overnight boarding visit. Personal items are considered to be toys, beds, blankets, etc. You are also encouraged to bring your dog's own food and treats in order to prevent any stomach upset during their stay. Please do not bring your dog's food/water bowls, we will provide these items. If you choose not to bring your pet's food, we will feed our premium house diet at a charge of \$5 per day.

Medications: We are happy to administer any oral or topical medications which your dog may need during their stay. All medications must be in the original container with a prescription label that clearly states dosages, medication name, veterinarian's name and contact information. Medications which are complicated or difficult to administer may incur additional fees.

Hours: A Dog's Life is open Monday through Friday from 6:00 AM to 7:00 PM, Saturday from 9:00 AM to 5:00 PM, and Sunday from 10:00 AM to 4:00 PM. All dog drop-offs and pick-ups must occur during these hours. Any early drop-off or late pick-up may result in additional fees and any dogs not picked up by closing time may be boarded overnight for a \$45 fee.

Boarding Reservations: ADL requires credit card information on file for all boarding reservations. We have a twenty-four (24) hour cancellation policy for all non-holiday reservations. Failure to give 24 hour notice will incur a \$45 late cancellation fee. Holiday reservations require a \$100 deposit and two (2) weeks cancellation notice. Any appointments cancelled without proper notice will forfeit deposit.



Waiver, Acknowledgements, and Authorizations

I, _____, the owner of _____,
(owner name) (dog's name)

expressly waive any and all claims against A Dog's Life Doggy Daycare (ADL) which may arise from my pet's participation in any and all activities and services which ADL may provide. I further agree that ADL shall not be responsible for illness, injury, damage, loss or other harm to myself, my property, my dog, and my guests.

I fully understand that ADL provides off-leash socialization of dogs and while ADL and its employees will provide the best possible supervision and care, my pet may still become injured due to the unpredictable nature of dog behavior. I assume any and all risks associated with the provided services including but not limited to injury, illness, natural disasters, vehicle collisions, and death. I further agree to be responsible for all costs, liabilities, damages, and expenses which may occur due to my pet's behavior and actions.

I confirm that my pet is healthy, has had all required vaccinations (Rabies, Distemper, Bordetella) and preventative care (Fecal Exam, Flea Prevention), and has not been ill with any communicable disease within the last 30 days. I understand that my pet must be spayed or neutered by 6 months of age or he/she will no longer be allowed to socialize in the daycare setting.

I acknowledge that despite the best possible sanitation and disinfection techniques, my dog may still be susceptible to contracting and transmitting communicable diseases including, but not limited to, kennel cough, giardia, canine papilloma virus, and intestinal parasites. ADL will never knowingly accept animals which are sick or have unknown health history, however animals may be contagious with certain illnesses without showing symptoms.

I authorize ADL to seek appropriate medical care and make decisions regarding necessary treatment of my pet in the case of a medical emergency in the event that I am not reachable by phone. I further authorize ADL to access my pet's medical records and health information from my veterinarian. I understand that I am responsible for any costs and fees incurred with any medical care. ADL will make a reasonable effort to have my pet seen by his/her regular veterinarian however ADL is authorized to seek treatment from other veterinary hospitals as needed.

I understand that ADL does not accept aggressive or uncontrollable animals and certify that my pet has not shown aggressive behavior towards or caused harm to any human or other animal. I also understand that ADL reserves the right to use training tools for correction and to remove animals from the daycare area for behavioral issues as deemed necessary by ADL staff.

I agree that my dog's name and likeness may appear on ADL's website and advertising, including but not limited to magazine, newspaper, radio, television, and internet.

I authorize ADL to keep my credit card information on file to be charged for services rendered, late fees, and emergency medical care. I understand that all charges are final.

Name on Card: _____ Visa _____ MasterCard _____

Account #: _____ - _____ - _____ / _____ Exp. Date: _____ / _____

Security Code (3 digit code on back of card): _____ Billing Zip Code: _____

By signing below, I certify that I have filled out the application (pages 1 & 2) truthfully and to the best of my ability. I also acknowledge that I have read, understand, and accept the policies and procedures (page 3) and the terms outlined above. I hereby release ADL from all liability regardless the cause. I also acknowledge that rates, services, and policies of ADL are subject to change without notice.

Print Name

Signature

Date