



Daycare & Boarding

All information is confidential and used only for Puppington Palace and its staff to better care for your pet.

How did you hear about us? _____

Owner Information:

Owner's Name(s): _____

Address: _____

City: _____ State: _____ Zipcode: _____

Phone numbers:

Cell: _____ Cell: _____

Home: _____ Home: _____

Email address for appointment confirmations: _____

Emergency contacts:

Name: _____ Phone number: _____

Name: _____ Phone number: _____

Dog's Information:

Dog 1 Name: _____ Breed: _____ Color: _____

CIRCLE ONE: SPAYED / NEUTERED / UNALTERED I AM A: MALE/FEMALE

Age: _____ Approximate Birthday/Gotcha day: _____

Please check all answers that describes your dog's personality:

- Outgoing Timid Affectionate Reserved Protective Feisty Friendly Obedient
 Aggressive Independent Playful Confident Submissive Clingy Gentle

Please check all answers that describe your dog's attributes:

- Biter Climbs fences Howls Active chewer Barks excessively Likes to herd Low activity level
 Toy aggressive Food/treat aggressive Separation anxiety Excessive marking
 Excessive mounting Coprophagia (Eats feces) Other: _____

Please check all that apply when describing situations where your dog may become unfriendly:

- Grabbing collar Being removed from furniture Meeting strangers Meeting other dogs
 Being hugged Being brushed Being touched while sleeping Being touched on the ears
 Being touched on the paws Being touched on the mouth Being touched on the tail Being touched on the lower back
 Around women Around men Around children
 Other: _____

Dog 2 Name: _____ Breed: _____ Color: _____

CIRCLE ONE: SPAYED / NEUTERED / UNALTERED I AM A: MALE/FEMALE

Age: _____ Approximate Birthday/Gotcha day: _____

Please check all answers that describes your dog's personality:

- Outgoing Timid Affectionate Reserved Protective Feisty Friendly Obedient
 Aggressive Independent Playful Confident Submissive Clingy Gentle

Please check all answers that describe your dog's attributes:

- Biter Climbs fences Howls Active chewer Barks excessively Likes to herd Low activity level
 Toy aggressive Food/treat aggressive Separation anxiety Excessive marking
 Excessive mounting Coprophagia (Eats feces) Other: _____

Please check all that apply when describing situations where your dog may become unfriendly:

- Grabbing collar Being removed from furniture Meeting strangers Meeting other dogs
- Being hugged Being brushed Being touched while sleeping Being touched on the ears
- Being touched on the paws Being touched on the mouth Being touched on the tail Being touched on the lower back Around women Around men Around children
- Other: _____

Dog 3 Name: _____ **Breed:** _____ **Color:** _____

CIRCLE ONE: SPAYED / NEUTERED / UNALTERED I AM A: MALE/FEMALE

Age: _____ Approximate Birthday/Gotcha day: _____

Please check all answers that describes your dog's personality:

- Outgoing Timid Affectionate Reserved Protective Feisty Friendly Obedient
- Aggressive Independent Playful Confident Submissive Clingy Gentle

Please check all answers that describe your dog's attributes:

- Biter Climbs fences Howls Active chewer Barks excessively Likes to herd Low activity level Toy aggressive Food/treat aggressive Separation anxiety Excessive marking Excessive mounting Coprophagia (Eats feces) Other: _____

Please check all that apply when describing situations where your dog may become unfriendly:

- Grabbing collar Being removed from furniture Meeting strangers Meeting other dogs
- Being hugged Being brushed Being touched while sleeping Being touched on the ears
- Being touched on the paws Being touched on the mouth Being touched on the tail Being touched on the lower back Around women Around men Around children
- Other: _____

Dog 4 Name: _____ **Breed:** _____ **Color:** _____

CIRCLE ONE: SPAYED / NEUTERED / UNALTERED I AM A: MALE/FEMALE

Age: _____ Approximate Birthday/Gotcha day: _____

Please check all answers that describes your dog's personality:

- Outgoing Timid Affectionate Reserved Protective Feisty Friendly Obedient
- Aggressive Independent Playful Confident Submissive Clingy Gentle

Please check all answers that describe your dog's attributes:

Biter Climbs fences Howls Active chewer Barks excessively Likes to herd Low activity level Toy aggressive Food/treat aggressive Separation anxiety Excessive marking Excessive mounting Coprophagia (Eats feces) Other: _____

Please check all that apply when describing situations where your dog may become unfriendly:

Grabbing collar Being removed from furniture Meeting strangers Meeting other dogs
 Being hugged Being brushed Being touched while sleeping Being touched on the ears
 Being touched on the paws Being touched on the mouth Being touched on the tail Being touched on the lower back Around women Around men Around children
 Other: _____

Is your dog(s) on flea/tick control: yes/no

Has your dog(s) ever attended doggy daycare? yes/no

If so, where? _____

Are there any medical or behavioral issues/concerns we should be aware of? _____

Does your dog(s) have any medical conditions, allergies or physical limitations? If so, please describe. _____

Has your dog(s) ever bitten or attacked another dog? _____ person?

Has your dog(s) ever exhibited aggressive behavior towards another dog?

Person? _____ if so, why? _____

Current Veterinarian's name and contact:

Vet Clinic: _____

Phone number: _____

****WE REQUIRE UPDATED VACCINATIONS: RABIES, DISTEMPER & BORDETELLA***



Terms & Conditions

(Please initial next to each statement and sign/date at the bottom)

_____ All dogs must be picked up by close of business 6:00 PM M-F and 5:00 PM Sat-Sun.

_____ **RIGHT OF REFUSAL:** Puppington Palace reserves the right to refuse admittance to any dog or dismiss any dog that does not meet or maintain the health, temperament or other daycare/boarding standards. The determination shall be made at the sole discretion of Puppington Palace.

_____ **RELEASE OF LIABILITY:** Owner understands and agrees that during normal dog play, Owner's dog may sustain injuries. Dog play is monitored by Puppington Palace staff to best avoid injury, but scratches, punctures, torn ligaments, and other injuries may occur despite the best supervision. Owner further understands and agrees that neither daycare/boarding nor any of its employees, staff, or volunteers will be liable for any illness, injury, death, and/or escape of Owner's dog(s) provided that reasonable care and precautions are followed, and Owner hereby releases Puppington Palace staff or volunteers of any liability of any kind whatsoever arising from or as a result of Owner's dog(s) attending Puppington Palace.

_____ **VETERINARIAN LIABILITY AND CARE:** Owner agrees to Puppington Palace to obtain medical treatment for Owner's dog(s) if he/she appears ill, injured, or exhibits any other behavior that would reasonably suggest that dog(s) may need medical treatment including anesthesia. Owner agrees to be fully responsible for the cost of any such medical treatment and for the cost of any transportation for the purposes of such treatment. Owner gives permission to Puppington Palace to use Owner's vet or nearest 24-hour vet hospital for required treatment. Yes _____ or No _____ If Yes, maximum dollar amount \$_____.

_____ **WEAKENED IMMUNE SYSTEM:** Owner understands special-needs dogs, young puppies, and senior dogs naturally have a higher risk of injury, stress-related illnesses, weakened immune system, or exacerbation of any pre-existing condition. As such, by using our facility for daycare or boarding the Owner is waiving any claim for injury or illness experienced by Owner's dog while in our care.

_____ **PHOTO AND VIDEO RELEASE:** We love to post pictures and videos on Facebook, our website, and/or in magazine ads. Owner agrees to allow Puppington Palace to use Owner's pet's name and any images or likeness of Owner's pet taken while he/she is at Puppington Palace, in any form, for use at any time, in any media, marketing, advertising, illustration, trade or promotional materials without compensation, and Owner releases to Puppington Palace all rights that Owner may possess or claim to such image, likeness, recording, etc.

_____ ELDERLY DOGS: Owners of elderly dogs (approaching the end of life) need to know if in the event Owner's dog passes on while in our care, our policy is to transport Owner's dog to Owner's vet (within 15 miles) where he/she will be held until Owner can be reached by the Vet for further instructions. If Owner's vet is closed or outside of our transport distance, then we will transport to nearest 24-hour facility. Trip charge will apply based on time/distance.

_____ Puppington Palace reserves the right to immediately change your dog's type of boarding/daycare if we believe it is necessary to protect the health and well-being of your dog, other dogs, or our staff. We will do our best to contact you, provided we are given accurate contact info, should this become necessary.

_____ Check-out time for boarders is noon EVERYDAY. Dogs leaving after this time will be charged a late pick-up fee of \$20 UNLESS they are signed up for a groom. All charges must be paid in full upon pick-up of your dog.

_____ Owner is aware that by leaving pet at Puppington Palace, or any other pet facility, they are at a higher risk of contracting canine cough (kennel cough), viruses. Canine cough (kennel cough) is similar to the flu in humans and, while all dogs in our care are vaccinated, no vaccination is 100% effective. We maintain a very high level of cleanliness but interaction with other dogs carries with inherent risks.

_____ Dog owner attest that the dog is friendly and has shown no prior aggression toward dogs or people. Dog owners are responsible for any injuries caused by his or her dog and any medical care needed as a result.

_____ Dog owner agrees to hold Puppington Palace, harmless and indemnify it against all legal defense cost, fees and business losses resulting from any claims made or caused to be made against Puppington palace for which it, its agents or employees are not ultimately held responsible.

Owner hereby certifies that Owner has read and understands this Waiver and Release of Liability and the regulations set forth above. By signing this agreement, Owner agrees to be bound by its terms and conditions.

Owner signature

Print name

Date: _____

THIS PAGE FOR OFFICE USE ONLY:

TEMPERAMENT TEST:

Test Performed on: _____

Test performed by: _____

Initial test PASS / FAIL

Daycare room tested in BIG / SMALL

Initial Behavior Assessment:

Daycare room suggested: BIG / SMALL

A few dogs I really liked:

A few dogs I picked on / picked on me:

Other end of test notes, assessments, concerns, ect.

DOG APPROVED FOR FURTHER DAYCARE YES / NO

Manager Signature: _____