

Resort for Pets Guest Information

Owner Name: _____

Pet Name: _____ **Breed:** _____

Sex: _____ **Color:** _____

Phone/Email where you can be reached:

Can we text you at this number? **YES NO**

If we are unable to contact you, emergency contact name and number: _____

Daycare/Group Play requirements:

- All dogs must be current on vaccinations (Rabies, Distemper/Parvo, Bordetella within the last 6 months, and a negative fecal in the last year)
- All dogs must be 6 months of age or older and be spayed or neutered
- All dogs must be non aggressive
- Hours are 730 am and 6pm

All dogs must complete a one time screening and temperament test to ensure that we have a safe play environment for all pets.

Please answer the following questions about your pets so that we may get to know your pet better.

How long have you had your pet? _____

Where did you get your dog? _____

If adopted, do you know his/her history? **YES NO**

If yes, please describe:

Does your pet socialize with other animals on a regular basis? **YES NO**

Has your pet been taken to a dog park? **YES NO**

How did they react? _____

Have you ever boarded your pet before? **YES NO**

Is your pet crate trained? **YES NO**

Is your pet leash trained? **YES NO**

Is your pet housebroken? **YES NO**

Has your pet been to obedience training? **YES NO**

If yes, where? _____

Has your pet been to any other daycares? **YES NO**

If yes, where? _____

Does your dog know any commands? **YES NO**

If yes, which ones? _____

Can you take a food or toy item away from your pet without growling? **YES NO**

How does your pet react to men or women? _____

Has your dog ever growled at or shown aggressive behavior towards people, strangers, children, puppies, specific breeds or other animals? **YES NO**

If yes, please describe _____

Has your pet ever bitten a person, dog or other animals? **YES NO**

If yes, please describe _____

List any specific types of people, dogs, animals, or situations that your dog dislikes or fears:

Does your dog like to try to escape or run away? YES NO

If yes, please describe _____

Are there any areas of their body that your dog does not like to be touched? _____

Describe your dog's personality (mark all that apply):

Mellow/calm Shy/Submissive Playful High energy Dominant/Alpha
 Well behaved Unruly

Does your pet have any medical conditions that we should be aware of? YES NO

If yes, please describe _____

Is your pet on any medications? YES NO

If yes, please describe _____

Risks: Owners understand that dogs are unpredictable in behavior and are aware of the risks involved in play and assume all risks. While we provide the best supervised care possible, there can be a risk of injury to a dog in daycare (i.e. worn pads, twisted ankles, sore muscles, scratches, etc) Dogs may also come back dirty and wet at times.

To the best of my knowledge, the information that I have provided on this form is both accurate and true. I also acknowledge that I have read, understand and agree to abide by the policies and procedures.

Owner's Signature: _____