

DAY CARE APPLICATION

41249 Vincenti Court

Novi, Michigan 48375

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www.pawprintinn.com



Please take a few minutes to complete this Application for your pet, **one per pet** please. It will help us understand your pet's background, personality and special needs so we can make Day Care at the Paw Print Inn® as safe and as comfortable as possible. Thank you for your time and cooperation.

Day Care is designed for social dogs to play and have fun. Safety is our primary goal; therefore, Day Care is not for every dog. It is not a place for aggressive dogs to learn how to be social. To be accepted into our Day Care Program, each Day Care Guest must:

1. Complete this Day Care Application
2. Complete the Boarding and Day Care Agreement
3. Be spayed (except puppies under six months)
4. Attend a Day Care Evaluation Day and meet the temperament testing requirements (see House Rules)

CLIENT PROFILE

Owner's Name _____

Address _____

City _____ State _____ Zip _____

Home _____ Work _____ Cell _____

Email _____

Emergency Contact(s): In the event of an emergency who do we contact first?

You Emergency Contact

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Others authorized to pick-up my pet _____

My Veterinarian _____

Clinic Address _____ Phone _____

GUEST PROFILE

Pet Guest's Name _____ Nickname _____

Breed _____ Color _____

Male Neutered Female Spayed Weight _____

Birth date _____ How long have you had this pet? _____

This pet is from: Rescue Store Breeder Stray Other _____

Professional Obedience Education: None In-Home Group Classes Private Lessons

Has this pet ever been boarded before? Yes No If no, why? _____

If yes, please describe your pet's experience: _____

Has this pet ever been to day care before? Yes No If no, why? _____

If yes, please describe your pet's experience: _____

PERSONALITY PROFILE

Check all that apply:

ATTRIBUTES

- Fence jumper
- Fence climber
- Digger
- Jumps
- Protective
- Mouthy
- Paper/litter trained
- Independent

PERSONALITY

- Outgoing
- Verbally sensitive
- Timid
- Affectionate
- Pushy
- Aggressive
- Excitable
- Playful

BEHAVIOR

- Will Bite
- May bite
- Snaps
- Shows teeth
- Freezes
- Trembles
- Moves away
- Inappropriate chewing

MY PET:

- | | | |
|------------------------------|--------------------------------|-----------------------------------|
| Grabbing collar | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Getting hugs | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being brushed | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being around other dogs/cats | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched while sleeping | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on ears | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on paws | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on mouth | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being touched on tail | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Having nails clipped | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being in a crate | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |
| Being around children | <input type="checkbox"/> Likes | <input type="checkbox"/> Dislikes |

PLAYS BEST WITH:

- No dogs
- Big dogs
- Little dogs
- Older dogs
- Younger dogs
- Puppies

Does your pet engage in any unusual or repetitive behaviors? Yes No If yes please explain (include examples): _____

Has your pet ever bitten a person? Yes No If yes please explain: _____

Has your pet ever bitten another pet? Yes No If yes please explain: _____

Has your pet ever growled at someone? Yes No If yes, what were the circumstances? _____

Has your pet ever growled or snapped at anyone who has taken their food or toys away from him/her? Yes No If yes, please explain: _____

Are there any particular types of people your pet seems to fear or dislike? Yes No If yes, please explain: _____

Is your pet an escape artist? Yes No If yes, please explain: _____

Is your pet frightened of thunderstorms/loud noises? Yes No If yes, please describe what happens and how do you soothe your pet's fear: _____

Describe you pet's activity level: _____

Where are your pet's favorite petting spots? _____

Check one from the following; the level of socialization that best describes your dog's routine:

- None- No knowledge of other dog interaction
- Minimal- On lead encounters only. (continued)
- Moderate- Some off-lead playtime on occasion with a visitor's dog
- Extensive- Regular visits to dog social events, daycare etc.

Are there any types and/or breeds of dogs your pet seems to automatically fear or dislike? Yes No If yes, please explain: _____

How does your pet react to another pet approaching it in a park or on a walk? _____

Does your pet play with other pets? Yes No If yes, please describe size, breed and temperament of the other pets? _____

- Male and Females
- Only Males
- Only Females

What kinds of games does your pet like to play with people? _____

What kind of games does your pet like to play with other pets? _____

MEDICAL INFORMATION

Does your pet have any allergies? Yes No If yes, please describe: _____

Please provide details of your pet's diet – type (brand, kibble, canned, daily intake, etc): _____

Does your pet have any bathroom related issues or concerns? Yes No If yes, please explain: _____

Does your pet have any physical disabilities? Yes No If yes, please describe the disability and any physical restrictions you would like to have enforced: _____

Does your pet have any pre-existing medical conditions? Yes No If yes, please describe and advise of any medication used to control the condition (please include name and dosage): _____

Does your pet have any sensitive areas on his/her body? Yes No If yes, where? _____

Date of last physical exam: _____

Does your pet have any physical restrictions limiting activity or movement? _____

Is your pet taking any medications? Yes No If yes, please name medications and the reasons. _____

My pet will require the Paw Print Inn® to administer the following medications. Oral medications are complementary. Topical medications and injections are \$2.00 per administration. _____

Is your pet allergic to any medications, foods, or treats? Yes No If yes, please list and describe the allergic reactions: _____

You are required to provide proof from your veterinarian of the following vaccinations and tests:

Expiration date of DHLPP/Corona _____ Expiration date of Bordatella _____

Expiration date of Rabies _____ Date of last Heart Worm Test _____

AGREEMENT

I specifically represent to the Paw Print Inn® that I am the legal owner of my dog. In addition, I attest that my dog is: healthy, meets the published vaccination requirements, has not harmed or shown aggression or any other kind of threatening behavior towards any persons and/or dogs and has not had any communicable illnesses within the past 30 days prior to admission. Further, I agree to inform the Paw Print Inn® of any changes in my dog's condition and/or behavior prior to subsequent services. I agree that if any fleas or ticks are discovered on my dog while at the Paw Print Inn, a flea bath will be administered at my expense.

I understand that my dog must be spayed prior to attending day care (if six months of age or older) and I am not permitted to bring personal items to day care.

I understand day care is offered between 6:30 a.m. and 6:30 p.m. I also understand that if my dog is not picked up by 6:30 p.m., my dog will be deemed as an overnight guest and I agree to pay an additional boarding fee of \$25. I agree to pay the applicable service rates in effect on the date my dog utilizes the services requested. I understand that all pre-paid day care package discounts are final with no refunds issued for unused portions. I agree that my dog shall not be released from the facility until all charges due are paid in full.

I accept the risks involved and agree that I am solely responsible for any damages that result from injuries caused by my dog while at the Paw Print Inn®. I further understand and agree that any problems that develop with my dog will be treated as deemed best by the staff of the Paw Print Inn, in their sole discretion. I authorize the Paw Print Inn® to do whatever is deemed necessary for the safety, health and well-being of my dog and I agree to assume full financial responsibility for any and all medical expenses incurred. I expressly wave and relinquish any and all claims against the Paw Print Inn®, its employees and representatives, provided reasonable care and precautions are followed. Under no circumstances shall the Paw Print Inn, Inc.'s liability exceed the lesser of the current chattel value of the Pet of the same breed or the sum of \$200 per Pet.

I understand the Paw Print Inn® reserves the right to refuse admittance to any dog that lacks proof of vaccinations, displays signs of untreated or potentially contagious conditions, demonstrates aggressive behavior, or who fails our standard health and temperament policies. I certify that I have read, understand and will abide by the rules and regulations as set forth in this Agreement.

Owner's Signature _____

Date: _____