

# Application for Dog Daycare / K-9 Day Camp



OWNER(S) \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ DAY PHONE \_\_\_\_\_

CELL \_\_\_\_\_ EMER PHONES \_\_\_\_\_ - \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**Dog's Information:** If two or more dogs please use separate form for each

Dog Name \_\_\_\_\_ Breed/Desc \_\_\_\_\_

Age/Date of Birth \_\_\_\_\_ Sex M  F  Weight \_\_\_\_\_ Spayed/Neuter

Age when acquired? \_\_\_\_\_ Where did you obtain your dog? \_\_\_\_\_

**Is your dog: (please check all that apply)**

- Allowed to run free in the home: supervised  unsupervised
- Allowed to run free in fenced yard: supervised  unsupervised
- Has jumped over fence in yard or other : \_\_\_\_\_ How High? \_\_\_\_\_
- Leashed walks only     Outside and unleashed but supervised     Dog Beach/Parks

Has your dog ever been on any agility equipment? \_\_\_\_\_

Does your dog prefer to play with  male  female dogs or both

Does your dog prefer to play with  small dogs  large dogs or both

Is your dog possessive of any toys, foods or objects? If yes, please explain \_\_\_\_\_

Has your dog ever shared his/her food or toys with other animals? Yes  No

Has your dog ever growled or snapped at anyone taking food or toys away? If yes, please explain:

How does your dog react when strangers approach the home or yard or out in public?

Is your dog afraid of any types of other dogs? \_\_\_\_\_

Does your dog play off-leash with other dogs? Briefly describe: \_\_\_\_\_

How does your dog react to puppies? \_\_\_\_\_

Has your dog ever growled at someone? \_\_\_\_\_ If yes, what circumstances? \_\_\_\_\_

\_\_\_\_\_ What did you do? \_\_\_\_\_

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Has your dog ever bitten another dog? \_\_\_\_\_ If yes, what circumstances? \_\_\_\_\_  
\_\_\_\_\_What did you do? \_\_\_\_\_

## What is your dog's training history? (Please circle)

No training	Trained yourself	Puppy Kindergarten
Group class basic	Group class advanced	Private training sessions
Obedience titles/awards	Agility	Other

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

Sensitive about any parts of his body?  Tail  Paws  Hindquarters  Belly  Nails (clipped)

Being brushed; if so, explain: \_\_\_\_\_

Hip problems? \_\_\_\_\_ If yes, explain; What if any restrictions need to be placed on your dog's activities or  
Movements? \_\_\_\_\_

Are there any physical problems or disabilities which may affect him/her in day camp/daycare? \_\_\_\_\_  
\_\_\_\_\_

**Are there any other issues that you wish to address**, or feel you should inform us of and how much of a problem do  
you consider the behavior to be?

Issue	Very Serious	Serious	Not Serious
1.			
2.			
3.			

Does your dog get exercise  Daily  Every other day  Other \_\_\_\_\_

For How Long each session? \_\_\_\_\_

What is the main reason you have chosen Day Camp/Daycare for your dog?  
\_\_\_\_\_

**Special Notes:** (List any diet restrictions, allergies or special needs/concerns)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Veterinarian Hospital: \_\_\_\_\_ Phone \_\_\_\_\_