



Barks-N-Buddies: Dog Resort & Play Center Day Care & Boarding Application

| Owner Information: | | | | | | | |
|----------------------------|--|-------------|--------|-------------|--------|--|--|
| Name: | | | | | | | |
| Address: | | | | | | | |
| City: | | State: | | Zip: | | | |
| Home Phone: | () | Work Phone: | () | Cell Phone: | () | | |
| Email: | | | | | | | |
| How Did You Hear About Us? | <input type="checkbox"/> Internet Search <input type="checkbox"/> Drove Past Facility <input type="checkbox"/> News Paper <input type="checkbox"/> Flyer/Newsletter <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Other | | | | | | |

| Pet Information: | | | Date: | | |
|------------------|----------------------------|----------------------------|----------------|------------------------------|--|
| Name: | | | Birthday: | | |
| Breed: | | | Age: | | |
| Color: | | | Spay/Neutered: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Sex: | M <input type="checkbox"/> | F <input type="checkbox"/> | Weight: | Rescue: | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| Meals: | | | | | | | |
|------------------|-------------------------------|-----------------------------------|------------|-------------------------------|-------------------------------|-------------------------------|-----------------------------------|
| Type of Food: | | | | Wet: <input type="checkbox"/> | Dry: <input type="checkbox"/> | Both <input type="checkbox"/> | |
| Amount: | | | | Times Per Day: | AM <input type="checkbox"/> | AFT <input type="checkbox"/> | PM <input type="checkbox"/> |
| Food Aggressive? | | | | Treats Ok: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Appetite: | Good <input type="checkbox"/> | Not Good <input type="checkbox"/> | How Often: | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | No Limit <input type="checkbox"/> |

| Medication: | | | | | | | |
|------------------|--|--|--|----------------|-----------------------------|------------------------------|-----------------------------|
| Type: | | | | Times Per Day: | AM <input type="checkbox"/> | AFT <input type="checkbox"/> | PM <input type="checkbox"/> |
| How Taken: | | | | Reason: | | | |
| Allergies: | | | | Restrictions: | | | |
| Flea Protection: | | | | Last Applied: | | | |

| Vaccinations: | | | | | | |
|---------------|------------------------------|-----------------------------|-------|--|--|--|
| Rabies: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Date: | | | |
| Bordetella: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Date: | | | |
| DHLPP: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Date: | | | |
| Heart Worm: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Date: | | | |

NOTICE: ALL PETS MUST BE SPAYED OR NEUTERED IF OLDER THAN 9MOS.

SHOTS REQUIRED: Rabies, Bordetella (within 6mos.), DHLPP.

Hours: Monday – Friday 7am -12pm, 2pm -7pm, Saturday 10am - 4pm, Sunday 5pm - 7pm, Please drop off/pick up at least 15 minutes before any closing times.

On weekends, dogs get half day of playtime.



| Personality: | | | |
|---|--|------------------------------|--|
| Where did you get your dog? | | | |
| If adopted, what do you know about your dogs past history? | | | |
| Are there other pets in your household? | Yes <input type="checkbox"/> No <input type="checkbox"/> | List: | |
| How does this dog interact with other dogs in your household? | | | |
| How does your dog react to strangers? | | | |
| Has your dog ever bitten anyone or another dog? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, explain | |
| Does your dog like to be petted? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, where? | |
| Does your dog have any sensitive areas on its body? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, where? | |
| Have you boarded your dog before? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, how did He/she react? | |
| Does your dog act afraid of any specific items or noise? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, please explain | |
| Have you ever tried to take food away from your dog? | Yes <input type="checkbox"/> No <input type="checkbox"/> | What happens? | |
| Has your dog ever growled or snapped at anyone who has taken his/her food or toy away from him/her? | Yes <input type="checkbox"/> No <input type="checkbox"/> | What were the circumstances? | |
| Has your dog ever shared his/her food or toys with other animals? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, what happens? | |
| Are there any kinds of dogs your dog automatically fears or dislikes? | Yes <input type="checkbox"/> No <input type="checkbox"/> | List | |
| Does your dog have a preference for male or female dogs? | | | |
| What commands does your dog know? Does he/she know any hand signals? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, which | |
| Does your dog have any problems in any of the following areas; (If so, please explain) | Yes <input type="checkbox"/> No <input type="checkbox"/> | If so, when and where? | |
| Separation anxiety? | | | |
| Barking? (i.e. when left alone) | | | |
| Jumping Fences/Escaping? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Other: | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Has your dog ever been expelled from boarding or daycare? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Is there anything else we should know about your dog? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |



Emergency Contact Information

| Emergency Contact: | | | | | | | |
|--------------------|-----|-------------|-----|-------------|-----|--|--|
| Name: | | | | | | | |
| Address: | | | | | | | |
| City: | | State: | | Zip: | | | |
| Home Phone: | () | Work Phone: | () | Cell Phone: | () | | |
| Email: | | | | | | | |

| Emergency Contact: | | | | | | | |
|--------------------|-----|-------------|-----|-------------|-----|--|--|
| Name: | | | | | | | |
| Address: | | | | | | | |
| City: | | State: | | Zip: | | | |
| Home Phone: | () | Work Phone: | () | Cell Phone: | () | | |
| Email: | | | | | | | |

| Veterinarian Information: | | | | | | | |
|---------------------------|-----|--------|-----|--------|-----|--|--|
| Name: | | | | | | | |
| Address: | | | | | | | |
| City: | | State: | | Zip: | | | |
| Phone: | () | Fax: | () | Other: | () | | |
| Email: | | | | | | | |



Additional Dogs:

| Pet Information: | | | Date: | |
|------------------|---|---------|----------------|--|
| Name: | | | Birthdate: | |
| Breed: | | | Age: | |
| Color: | | | Spay/Neutered: | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Sex: | M <input type="checkbox"/> F <input type="checkbox"/> | Weight: | Rescue: | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| Meals: | | | |
|------------------|---|---|--|
| Type of Food: | | Wet: <input type="checkbox"/> Dry: <input type="checkbox"/> Both <input type="checkbox"/> | |
| Amount: | | Times Per Day: AM <input type="checkbox"/> AFT <input type="checkbox"/> PM <input type="checkbox"/> | |
| Food Aggressive? | | Treats Ok: | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Appetite: | Good <input type="checkbox"/> Not Good <input type="checkbox"/> | How Often: | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> No Limit <input type="checkbox"/> |

| Medication: | | | |
|------------------|--|---|--|
| Type: | | Times Per Day: AM <input type="checkbox"/> AFT <input type="checkbox"/> PM <input type="checkbox"/> | |
| How Taken: | | Reason: | |
| Allergies: | | Restrictions: | |
| Flea Protection: | | Last Applied: | |

| Vaccinations: | | | |
|---------------|--|-------|--|
| Rabies: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Date: | |
| Bordetella: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Date: | |
| DHLPP: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Date: | |
| Heart Worm: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Date: | |



Daycare & Boarding Agreement and Release of Liability

1. I understand and agree that Barks-N-Buddies: Dog Resort and Play Center (and its staff, owners, contractors and agents) (collectively Barks-N-Buddies) will not be liable for any problems, damages, injuries caused by my pet(s) during its stay at Barks-N-Buddies. I as the pet owner (or owner's authorized representative) agree to be solely responsible for any and all acts or behavior of my pet while in the care of Barks-N-Buddies. I hereby release Barks-N-Buddies from any liability arising from my dogs' attendance and participation in the boarding/daycare environment.
2. I understand and agree that in admitting my dog(s) to Barks-N-Buddies, Barks-N-Buddies' staff have relied on my representation that my dog(s) is/are in good health and has/have not harmed or shown aggressive or threatening behavior towards any person or any other dog.
3. I hereby certify that my dog(s) are in good health and has/have not been ill with any communicable diseases in the past 30 days prior to check-in. During the period of this agreement, owner agrees to notify facility of any known exposure of dog(s) to a communicable disease and hold pet out of attending facility until pet is symptom free for a minimum of seven (7) days or with written veterinary clearance. In the event that my dog(s) becomes ill or injured to the point of requiring or appearing to require medical treatment, Barks-N-Buddies staff will attempt to contact me, followed by an attempt to contact the emergency contact person I listed upon registration of my dog(s) with Barks-N-Buddies. I give permission to Barks-N-Buddies to provide emergency medical treatment by a veterinarian for my dog(s), should the need to arise within the discretion and judgment of Barks-N-Buddies and such expenses shall be paid by me.
4. I understand that Barks-N-Buddies' daycare and open boarding areas and play areas are places where animals commingle in groups. I recognize that there are inherent risks of illness and/or injury when dealing with animals. Similarly, I understand that when dogs play in groups, they may sustain minor injuries such as nicks and scratches. Other risks include, but are not limited to problems resulting from pets ingesting food scraps or other materials found in or around the facility and kennel cough. Barks-N-Buddies staff may wait until I pick up my dog(s) to inform me of any non-serious injury, such as nicks or scratches.
5. Barks-N-Buddies agrees to exercise due and reasonable care for the Pet. Owner releases Barks-N-Buddies from any claims made against Barks-N-Buddies or its employees or members or other agents or losses or damages of any kind suffered by Barks-N-Buddies for or attributable to, any injury or illness of Pet. Owner agrees that Owner shall be solely responsible for any and all acts and behavior of said Pet while in the care of Barks-N-Buddies, including payment of costs for injury to staff or other animals or damage to facilities caused by the Pet. Furthermore, Owner indemnifies Barks-N-Buddies as a result of Owner's failure to inform Barks-N-Buddies of any pre-existing condition the Pet may have (such as illness or aggression problems) or which were otherwise caused by the Pet. If pet is transported to or from Barks-N-Buddies by its staff, Owner holds Barks-N-Buddies harmless in the event of injury or accident during transportation. It is expressly agreed by Owner and Barks-N-Buddies that Barks-N-Buddies' liability shall in no event exceed the lesser of the current chattel value of a pet of the same breed or the sum of \$200 per Pet.
6. I understand that if I leave my dog(s) at Barks-N-Buddies for a period of 5 days beyond the scheduled ending date of their stay, my dog(s) will be considered abandoned and necessary steps will be taken to turn the animal(s) over to the proper authorities.
7. I certify that I have carefully read and understand the policies of Barks-N-Buddies as set forth in this document and that I have read and understand the conditions and statements of this agreement.

Signature of Owner or Authorized Representative

Date