



DAYCARE APPLICATION

OWNER INFORMATION:

DATE: _____

Client name: _____

Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Address: _____ City: _____ Postal Code: _____

PET INFORMATION

Dog's Name: _____ Breed: _____ M / F _____ Spay / Neut. _____

Age: _____ Age required: _____ Where Acquired: _____

Veterinarian: _____ Phone: _____

Address: _____

Health Issues: _____

Behavioural Issues: _____

In the event of an injury, do you authorize the training centre to take your dog to your vet at the owner's Expenses? Yes _____ No _____ Please sign here: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Does your dog sleep in a crate? _____

Is your dog house-trained? _____

Does your dog eliminate on command? _____ If so, what is the command? _____

Is your dog possessive of toys? _____ What are his favourite toys? _____

What games does your dog like to play? _____

Has your dog ever climbed or jumped a fence? _____ How high was it? _____

Does your dog eliminate on: Grass? _____ Cement? _____ Asphalt? _____ Any surface? _____

Does your dog eliminate on leash? _____

Does your dog have any medical problems? _____ If yes, please explain _____



"Where your dog is as unique as you are"

Please tell us anything else that might be helpful in ensuring your dog has an enjoyable experience at our day care: _____

OTHERS AUTHORIZED TO PICK UP YOUR DOG:

Name: _____ Name: _____

Please note: To ensure the safety of your pet and others, the dog’s temperament must first be assessed by a Dazine Canine trainer before being accepted to daycare.

Aggressive dogs will not be accepted to daycare.

Dogs not passing the temperament assessment may wish to consult the trainer for a behaviour modification program.

Please read and sign: I have read the above questions and hereby state that the answers are true and correct. I also acknowledge that my dog is in good health without illness or injury upon acceptance to daycare.

Owner signature: _____ Date: _____

