



### Daycare/Lodging/Grooming Application

Parent Information			
Last Name:		First Name:	
Cell Phone:		Daytime Phone:	
Home Address:			
Email Address:			
Alternate Contact Name:		Alternate Contact Phone:	
Emergency Contact Name:		Emergency Contact Phone:	

How did you find us? Please Circle One.	Referral	Name:	Web Search	Yelp!	Mailing	Other	
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Dog Information					
Name	Breed	Sex	Fixed Y/N	Birthday	Age

Veterinarian Information
Clinic Name:
Clinic Address:
Clinic Phone:
Veterinarian's Name:

Daycare Lodging Behavior Assessment Date:	
First Grooming Appointment Date:	

Dog Name(s): \_\_\_\_\_

If multiple dogs, please describe for each dog by writing the name with the description for each special situation.

<b>Medical History:</b> ever been diagnosed with?	<b>Yes</b>	<b>No</b>	<b>If yes, describe.</b>
Heart Condition			
Thyroid Disease			
Allergies – food or skin related allergens			
Allergies – Seasonal			
Seizures (frequency, severity, cause of occurrence, behaviors to look for, etc.)			
Physical Limitations (arthritis, blind, deaf, surgery, etc.)			
Bloat			
Cancer			
Other: _____			

<b>Pest Control Policy:</b> fleas/ticks/worms	<b>Yes</b>	<b>No</b>	<b>If no, describe.</b>
Do you use regular flea/tick preventative?			
Does your pet(s) have regular fecals done?			

<b>Experiences</b>	<b>Yes</b>	<b>No</b>	<b>If yes, describe.</b>
Has your dog ever bitten a person, dog or other animal?			
Has your dog ever been bitten or attacked by another pet/animal?			
Does your dog have any phobias? (thunder, loud noises, vacuums, etc)			
Is there anything your dog doesn't like or do well with? (strangers, men, women, glasses, hats, activities, uniforms, etc)			

Additional comments: (anything we should know that's not listed)

To ensure the health and safety of all animals and staff at Downtown Dogs StL (DDStL), we require all clients to comply with the following rules and regulations:

**For Daycare/Lodging Services**

- Dogs must be spayed or neutered
- Dogs must have up-to-date vaccinations from a licensed vet.
  - Rabies, DHLPP or DA2PP, and Bordetella
- Dogs must be in good health and free from any communicable condition that may jeopardize other guests.
  - Dogs with a communicable condition in the last 30 days will require veterinarian certification of health to be admitted or readmitted.
  - Owners will need to certify that their dogs are in good health and been free of any communicable conditions.
  - If at any time during daycare a dog is noticed to have fleas or ticks, treatment will be applied and owners charged a cleaning fee at a minimum of \$20.00 and called to pick the dog up.
- Dogs must have a quick release collars and must be kept on a leash while entering and leaving the facility.
- Dogs must pass a behavior assessment:
  - 2 hour Evaluation Period
  - Must be a non-aggressive, non-treat or non-toy aggressive, and non-food aggressive.
- Daycare must be paid in full upon-pick up
- Overnight/Lodging must be prepaid

**\*\*Please keep in mind that your pet will be spending time with other dogs and that their health and safety is our main priority. Although it is supervised play, your dog may still acquire a nip or scratch.**

**\*\*Dogs not normally exposed to levels of activity, activity on hard surfaces or the outdoors, or activities around larger groups of dogs may experience:**

- Fatigue and sore muscles and/or joints
- Sore paws, blisters, bruises, and abrasions on paws
- May get dirty from outdoor activities and playing with other dogs

Dogs with excessive long nails may be at risk for injury. You are required to keep them groomed.

Water is available at all times; however, your dog may still be thirsty after daycare. Be aware of their water intake as excessive amounts may cause upset stomach.

**For Grooming Services:**

- Dogs must have up-to-date vaccinations from a licensed vet.
  - Rabies, DHLPP or DA2PP
  - Owners must submit verification from a licensed vet.
- Grooming must be paid in full upon pick-up

Photographs may and will be taken of the facility, dogs, and staff on a regular basis for advertising the services of our daycare. I grant DDStL and/or its selected agent’s permission to copyright, publish, or post pictures of my dog through any media.

I grant full power of decision concerning the care and well-being of my dog(s) should any medical emergency arise and is agreed upon that DDStL or its selected agents can and will make any decisions concerning medical treatment and choice of care giver up to \$\_\_\_\_\_.

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of DDStL witness: \_\_\_\_\_ Date: \_\_\_\_\_

## Client Agreement

For myself, my heirs and any assigned, I hereby release Downtown Dogs StL (henceforth referred to as DDStL), its agents, employees, other customers, and potential customers from any and all liabilities for injuries to myself, my pet, or any other property of mine which arise in any way out of services and/or products provided by or as a consequence of my association with DDStL. I acknowledge and understand that every dog reacts differently and that animals, by nature, are unpredictable.

Dogs and animals may, without warning, bite or cause injury to humans and other dogs. I acknowledge and understand that there are certain risks involved in participating in daycare, including but not limited to, dogfights, dog bites to humans and other dogs, and transmission of disease.

Please be advised that grooming charges will be assessed by the groomer. While we do a professional job, the desired trim or price may fluctuate due to a pet's behavior, age, coat condition, and health. By signing this release, I give DDStL authority to do whatever is necessary to insure my pet's health and happiness.

In the case of an emergency, I grant DDStL and/or its selected agents full power of decision concerning the care and well-being of my pet(s). I give permission to transport my pet to and from any necessary veterinarian location and recognize and release DDStL from the risks of injury that accompany said transport. I also acknowledge that DDStL will not be financially responsible and I will retain full monetary responsibility.

Furthermore, I accept any and all conditions, rules, and regulations produced by DDStL associated with activities, use of the facilities and transport and hereby agree to comply with them.

By signing I am agreeing to accept sole responsibility, financial and otherwise, for anything and everything stated in this application and agreement. I hereby release DDStL of all liability no matter the cause.

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of DDStL witness: \_\_\_\_\_ Date: \_\_\_\_\_