



New Dog Enrollment Form

Owners name

Spouse/Other

Address

City/State/Zip Code

Primary Number

Secondary/Spouse

Other/Work

EMERGENCY INFO

Veterinary Clinic

Veterinary Number

Emergency Contact (Other than self)

Emergency Contacts Number

Credit Card Number

Expiration

CVC

Master card/Visa

PET INFO #1

Pets Name

Breed

Age/DOB

Male/Female

Spayed/Neutered: Yes/No

Coloring

Approx. Weight

Currently Eating:

____ c Am

____ c Noon

____ c Pm

Any abnormalities, health concerns, allergies,
medications? _____

Is your dog crate trained? Yes No

Does your dog have any of the listed quirks below, please circle all that apply:

Toy possessive Food Aggressive Separation anxiety Fears Collar/Leash Reactive

Please explain:

Has your dog been to daycare before? Yes No

Where? How did it go?

Is your dog friendly with other dogs, including new or strange dogs?

Yes No

Does your dog do well with new people? Yes No

How do they do with men?

Can your dog jump/climb a 6 foot fence? Yes No

PET INFO #2

Pets Name

Breed

Age/DOB

Male/Female

Spayed/Neutered: Yes/No

Coloring

Approx. Weight

Currently Eating: _____

____ c Am

____ c Noon

____ c Pm

Any abnormalities, health concerns, allergies, medications? _____

Is your dog crate trained? Yes No

Does your dog have any of the listed quirks below, please circle all that apply:

Toy possessive Food Aggressive Separation anxiety Fears Collar/Leash Reactive

Please explain:

Has your dog been to daycare before? Yes No

Where? How did it go?

Is your dog friendly with other dogs, including new or strange dogs?

Yes No

Does your dog do well with new people? Yes No

How do they do with men?

Can your dog jump/climb a 6 foot fence? Yes No

Dog name(s) _____

____ I certify I am the owner of the above dog(s).

____ The Dog House agrees to exercise all due and reasonable care to prevent injury or illness to my dog(s). I understand that despite the best efforts of The Dog House there are certain risks involved with group daycare. In the event of illness or injury the owners and employees of the facility shall not be held liable for such injury or illness. I understand that dogs can be unpredictable and that if my dog becomes injured while at The Dog House I will be responsible for my dog's veterinary bills and any other costs incurred due to the injury.

____ I hereby grant permission to this establishment to act in my behalf, and in my pets best interest, by obtaining veterinary care at my expense, if deemed necessary, for illness or injury. I understand that The Dog House will try to contact my regular veterinary before seeking medical attention elsewhere. I further agree to for all services incurred by and for my pet(s) during its stay at The Dog House.

____ I agree to pay all costs for any property damage or personal injury caused by my pet(s) during its visit. I agree to pay all charges at the time of pickup of my dog(s) and I understand my dog(s) may not leave the premises until all charges are paid in full. I understand that any animal left for more than 10 days beyond the agreed date of pickup may be rehomed at the discretion of the kennel owner.

____ I certify that my dog(s) have not harmed or shown any aggression or threatening behavior towards any person or any other dog.

____ I certify that my dog is currently in good health and has not had any communicable illness or parasite within the last two weeks.

____ I understand that The Dog House does not require, but does strongly recommend year round flea protection and twice annual stool sample tests for my dog's protection from parasites.

____ I understand that The Dog House reserves the right to refuse admittance to any dog(s) that does not meet the temperament and/or health requirements.

____ I understand my dog MUST be leashed in the store.

____ I certify that I have read, understand, and agree to all terms of this agreement.

Signature: _____

Date Signed: _____

Thank you for choosing The Dog House!



STAFF USE ONLY

For office use only:

Pass

Fail

Evaluation/Temp test

Date of Temp Test: _____ Dog Name: _____

0: Needs lots of work

1: Needs work but manageable

2: Good

3: Extremely well

Handling Skills:

Dog will walk with handler on leash to destination	0	1	2	3
Dog allows handler to grab collar without signs of aggression	0	1	2	3
Handler able to approach and touch dog <i>(i.e. collar, run hands over body, touch paws, etc)</i>	0	1	2	3
Does not show any aggression towards handler <i>(i.e. growling, biting, stiff body language)</i>	0	1	2	3

Listening Skills:

Responds to name	0	1	2	3
Comes when called	0	1	2	3
Follows Commands (Sit, Down, Shake)	0	1	2	3

Dog Skills:

Greets dogs appropriately	0	1	2	3
Plays in a respectful manner <i>(not extremely rough, no consistent humping)</i>	0	1	2	3
Able to take "leave me alone" cues from other dogs	0	1	2	3
Can be redirected when getting too wild	0	1	2	3

Notes: _____

