

DOGGIE DAYCARE CONTRACT



100 Animal Avenue

Sanford, NC 27330

919-776-0076

raezorgbd.office@gmail.com

OWNER'S NAME: _____

DOG'S NAME: _____ DATE OF BIRTH/AGE: _____

BREED: _____ WEIGHT: _____

COLOR: _____ GENDER: ☐ MALE ☐ FEMALE

EMERGENCY CONTACT NAME: _____

PHONE NUMBER: _____ RELATIONSHIP TO OWNER: _____

EMERGENCY CONTACTS MUST LIVE LOCALLY AND BE ABLE TO PICK UP YOUR DOG AND/OR ACT ON YOUR BEHALF IN CASE OF AN EMERGENCY. IF POSSIBLE, PLEASE LIST SOMEONE OTHER THAN YOURSELF.

AUTHORIZED PICK-UP/DROP-OFF NAME: _____

PHONE NUMBER: _____ RELATIONSHIP TO OWNER: _____

VACCINATION/EXAMINATION REQUIREMENTS: Rabies, Distemper/Parvo, 6-Month Bordetella (Kennel Cough), Canine Influenza (Flu) & Negative Fecal Exam (Intestinal Parasite Screening).

OWNERS ARE RESPONSIBLE FOR PROVIDING US A COPY OF YOUR MOST RECENT VACCINATION RECORDS.

INITIALS: _____

WHAT ARE THE PRIMARY REASONS FOR BRINGING YOUR DOG TO DAYCARE?

- ☐ LOVES TO PLAY
- ☐ LOTS OF ENERGY
- ☐ I WORK LONG HOURS
- ☐ FREQUENT BATHROOM BREAKS
- ☐ LONELINESS
- ☐ RECOMMENDATION OF VET OR TRAINER
- ☐ EXHIBITS DESTRUCTIVE BEHAVIOR
- ☐ OTHER: _____

HAVE YOU EVER USED ANOTHER DOGGIE DAYCARE SERVICE?

☐ YES ☐ NO

HOW DID YOU HEAR ABOUT RAE-ZOR GROOMING, BOARDING & DAYCARE?

- ☐ WEBSITE
- ☐ SOCIAL MEDIA
- ☐ REFERRAL: _____
- ☐ OTHER: _____

WHERE DID YOUR DOG COME FROM?

INTACT FEMALES: We do not accept females in heat. If a female begins her heat cycle during her daycare visit, you must have other arrangements made, and she must be picked up from the facility.

INTACT MALES: After one year of age, availability will be limited for all unneutered males.

IS YOUR DOG SPAYED OR NEUTERED?

☐ YES ☐ NO

IF NOT, DO YOU HAVE PLANS TO SPAY OR NEUTER YOUR DOG?

☐ YES ☐ NO

WHAT IS YOUR DOG'S FLEA/TICK PREVENTION?

HOW LONG HAVE YOU OWNED YOUR DOG?

WHICH OF THE FOLLOWING BEST DESCRIBES YOUR DOG'S EXERCISE ROUTINE?

- ☐ **COUCH POTATO:** Spends much of the day sleeping, with occasional visits to humans for pets and light play.
- ☐ **MODERATE EXERCISER:** Frequent walks/active play throughout the day, and always ready to go for more!
- ☐ **OLD AND MELLOW:** A senior dog who likes to take it slow and sleep all day.
- ☐ **ATHLETE:** My dog just cannot stop. They would run all day if I let them.
- ☐ **MILD EXERCISER:** Occasional walks throughout the day. Frequently looking for extra attention from their human companions.

HAS YOUR DOG EVER BEEN SOCIALIZED IN A GROUP SETTING WITH OTHER DOGS?

☐ YES ☐ NO

WHICH OF THE FOLLOWING BEST DESCRIBES YOUR DOG'S LEVEL OF SOCIALIZATION WITH OTHER DOGS?

- ☐ **NONE:** I have rarely seen them interact with another dog.
- ☐ **MINIMAL:** They had some successful on-leash encounters.
- ☐ **MODERATE:** They experience some off-leash play on occasion.
- ☐ **EXTENSIVE:** Regular at dog parks/daycare; frequently meets new dogs.

ARE THERE ANY RESTRICTIONS PLACED ON YOUR DOG'S ACTIVITY?

☐ YES ☐ NO

IF SO, PLEASE LIST:

DOES YOUR DOG HAVE ANY FOOD OR ENVIRONMENTAL ALLERGIES?

☐ YES ☐ NO

IF SO, PLEASE LIST:

IS YOUR DOG CRATE TRAINED?

☐ YES ☐ NO

HAS YOUR DOG EVER JUMPED OR CLIMBED A FENCE OR BARRIER?

☐ YES ☐ NO

TO YOUR KNOWLEDGE, IS THERE A **PERSON**, TYPE OF **DOG**, OR **SITUATION** THAT SEEMS TO MAKE YOUR DOG UNCOMFORTABLE?

☐ YES ☐ NO

IF SO, WHAT ARE THE CIRCUMSTANCES?

HAS YOUR DOG EVER GROWLED OR BITTEN ANOTHER PERSON OR DOG?

☐ YES ☐ NO

IF SO, WHAT WERE THE CIRCUMSTANCES?

DOES YOUR DOG GUARD CERTAIN RESOURCES (BEDS, FOOD, WATER, ETC.)?

☐ YES ☐ NO

IF SO, PLEASE DESCRIBE:

WILL YOUR DOG SHARE TOYS WITH OTHER DOGS?

☐ YES ☐ NO

IF NO, PLEASE DESCRIBE:

IS THERE ANY PLACE ON YOUR DOG'S BODY THAT THEY ARE SENSITIVE TO TOUCH?

☐ YES ☐ NO

IF SO, WHERE?

IS YOUR DOG AFRAID OF THUNDERSTORMS?

☐ YES ☐ NO

IF SO, WHAT IS THE BEST WAY TO COMFORT THEM?

SIGNATURE: _____

DATE: _____