

Bartram Trail Veterinary Hospital Daycare Application

(One Application per dog Please)

Pet Name: _____

Dog's Birthday: _____ Spayed/Neutered? YES NO

How long has your pet lived with you? _____

Where did you get your pet? Breeder Shelter Pet Store Friend Other _____

Does your pet have any current medical conditions? YES NO

If yes, please describe _____

Does your dog take any Medication regularly? YES NO

If yes, please list _____

Is your dog on any medication now? YES NO

If yes, please list _____

Which flea/tick preventative do you use? _____

Which heartworm preventative do you use? _____

Does your dog have any physical limitations that need our attention? YES NO

If yes, please describe _____

Does your dog have any allergies to treats? YES NO

If yes, what should we avoid? _____

Has your dog ever attended daycare before? YES NO

Has your dog ever been to an off leash park before? YES NO

How does your dog interact with:

Male dogs _____ Female Dogs? _____

Adult dogs? _____ Puppies? _____

Has your dog ever bitten a dog / cat / person?

If yes, what happened? _____

Is your dog any of the following?

A Digger? YES NO Jump? YES NO Very Shy? YES NO

Mouthy? YES NO Eat Poop? YES NO An Escape Artist? YES NO

Possessive of Toys? YES NO Bark a lot? YES NO Chew? YES NO

Has your dog ever climbed or jumped a fence? YES NO

Has your dog ever dug under a fence? YES NO

Please See Other Side

How does your dog react when you take away toys or food? _____

Has your dog ever had formal obedience training? YES NO

If yes, when? _____

What Commands Does your Dog know? _____

Please list the name and phone number of any person(s) that will be authorized to drop-off and pick-up your pet:

Name: _____ Phone: _____

Name: _____ Phone: _____

Your dog's regular veterinarian _____

Veterinarian Phone _____ (We will need to confirm vaccine status)

Please carefully read the statements below. By submitting this form you understand, authorize, and agree to the following:

- ◆ Bartram Trail Veterinary Hospital reserves the right to immediately remove your dog from group play and further daycare visits if we believe it is necessary to protect the health and well-being of your dog, other dogs, or staff members
- ◆ By submitting this form, you acknowledge the risks of communal dog play. Although we will offer reasonable prevention and care, the unpredictable personality of dogs can sometimes lead to injury. Dogs in playgroups can sometimes result in injuries or spreading of some illnesses such as bordetella.
- ◆ All dogs over 8 months of age are required to be spayed or neutered.
- ◆ All dogs must be current on Distemper, Adenovirus/Hepatitis, Parvovirus, Rabies and Bordetella Vaccines and must have had a fecal within the past 6 months.
- ◆ Bartram Trail Veterinary Hospital will obtain medical and vaccination records from your pet's primary veterinarian.
- ◆ Reservations are required for all daycare stays. Cancellations with less than 24 hours notice and no-shows will result in a 50% charge of fees for activities scheduled
- ◆ Bartram Trail Veterinary Hospital reserves the right to, without notice, adjust fees for services
- ◆ Payment for daycare and associated services must be made when pet being dropped off to make pick up time quicker and less confusing
- ◆ All pets must be picked up no later than 5:00 PM. Owners picking their dogs up after 5pm will incur a charge of \$5.00 for every 15 minutes past 5pm.

Signature of Owner: _____ Date: _____

Staff Member: _____ Date: _____