



APPLICATION

Owner Information Please print! Today's Date _____

Name _____ *Co-Owner's Name* _____
(live-in spouse/partner only)

Address _____

City _____ State _____ Zip _____

Home Tel _____ Cell _____ *Co-owner Cell* _____

Email Address _____ *Co-owner email* _____

Employer _____ Work Tel _____

Co-owner Employer _____ *Co-owner work tel* _____

Local Emergency Contact *(when we can't reach you, or if you are out of town)*

Name _____ Phone(s) _____

Pet Information

Name _____ Age _____ Color _____ Sex _____

Breed _____ Weight _____ Spayed/Neut _____ Age fixed _____

Veterinarian

Name _____ Telephone _____

Address _____

General Information about needs and services desired

How did you hear about Dog-ma? Referral: _____ Who: _____

Website: _____ Advertising:(Where:) _____ Article: _____

Service being considered: Daycare: _____ Boarding _____ Reason you are considering Dog-ma:

Daycare start date desired _____ Scheduled days desired: EVERY WEEKDAY

MON TUES WED THURS FRI SAT SUN

If **Overnight Boarding** services are desired, what specific days/dates are needed:

Where has your dog stayed on previous overnight trips _____

How does he adjust while you are away? _____

Has your dog ever been to a group-play facility? Where? _____

Where is/what does your dog do when you're not home? _____

_____ Where does your dog sleep? _____

Is/Has your dog ever been crated? When: _____ Reason _____

Does your dog have separation anxiety? Yes _____ No _____ How/when is this anxiety manifested?

Pet Personality Profile

Where/When did you get your dog? _____

If adopted, do you have knowledge about your dog's past history? _____

Describe your dog's basic temperament: (very active, inactive; shy, outgoing etc) _____

How many people are there in your household? Adult: male: _____ female: _____ Children _____

How does your dog behave around children? _____

Are there other animals in your household? Yes _____ No _____

If yes, list other animals by species, breed, whole/altered, ages, and sex

How does your dog get along with other resident animals? _____

Does your dog try to escape from home or on walks? _____

Feeding, Health, and Grooming

What type of food do you feed your dog: _____

How much/often do you feed your dog: A.M. _____ P.M. _____

Is your dog overweight? _____ On a weight control program? _____ Weight Loss desired (lbs) _____

Does your dog have a sensitive stomach or a history of stomach problems? Yes _____ No _____

Is this chronic? _____ Cause? _____

Dog-ma recommends bringing your dog's food whenever he/she boards with us to avoid stomach problems resulting from an abrupt change of diet.

Is your dog on a flea/tick control regimen? _____ If so, what product, and is he/she current?

Does your dog have hip dysplasia? Yes _____ No _____ Arthritis? _____

Do any reductions need to be placed on your dog's activities or movements for health reasons?

Explain: _____

Is your dog on any medications? _____ Why/What kinds? _____

Does your dog get allergies/hot spots? _____ Describe _____

How does your dog react to bathing/brushing: _____

Does your dog ever dislike being touched? _____

In what circumstances/where: _____

Behavior / Socialization

Has your dog ever played or socialized in a group of dogs: Off leash _____ On Leash _____

How many at most: _____ How often/how recent _____

Where: _____

What kind of games does your dog like to play with other dogs? Wrestle: _____ Chase _____

Does your dog ever get possessive over toys with other dogs? _____

Describe result: _____ How often _____

Does your dog respond "territorially" in your home to visiting dogs _____ people _____

If yes, what happens: _____

Does your dog ever bark at people/dogs passing outside your home or yard? _____ Excessively? _____

Describe circumstances _____

With a human, has your dog ever responded fearfully _____ growled _____ snapped _____ bitten _____

If yes, describe circumstances (be specific!): _____

When/how often? _____ Result _____

With a dog, has your dog ever responded fearfully _____ growled _____ snapped _____ bitten _____

If yes, describe circumstances (be specific!): _____

When/how often? _____ Result _____

How does your dog react to puppies? _____ Small dogs: _____

How does your dog react to another dog approaching it in a park, at the beach, or on a walk?

On lead: _____ Ever leash aggressive? _____

If yes, describe _____

Does your dog ever react aggressively behind a fence? _____

Does your dog have a “prey-drive” with smaller animals of any kind? _____

Has your dog ever killed or maimed an animal that was “prey” _____

Has your dog ever jumped up on someone? Yes ___ No ___ Circumstances _____

If current, what is your response/command? _____

Has your dog ever climbed or jumped a fence? Yes _____ No _____ When _____

If yes, what were the circumstances _____

Does your dog have any of the following habits:

Mouthiness (play biting, nipping with humans) _____

Houstraining Problems _____ How often/circumstance _____

Barking: _____ Any triggers? _____

Digging _____ Ever dug out of an enclosure? _____

Ignoring commands _____ Circumstances: _____

If yes to any of the preceding questions, how do you try to deal with these behaviors?

Has your dog ever had formal obedience training? Yes ___ No ___ When: _____

Where: _____ General Obedience/level: _____

Has your dog had behavior modification training for specific issue(s)? What _____

Result of training and current status of issue: _____

What commands does your dog know? _____

Will your dog come to us (generally) if we call him? _____

Is your dog frightened by any noises, storms, etc? Describe: _____

Has your dog ever growled or snapped at anyone who’s taken food/bones/trash/toys away from them?

Yes ___ No ___ Describe circumstances _____

Result? _____

Has your dog ever shared his/her food or toys with other animals? Yes _____ No _____

Will your dog drop food, toys, objects on command? Yes ___ No ___ Command: _____

If not, how do you get them away from your dog? _____

Will your dog destroy toys/non food items _____ consume toys/non-food items: _____

Describe what/when/result _____

Do you or does anyone play wrestle, tug, or chase with your dog? _____

Would you consider your dog a dominant personality? Yes _____ No _____

Are there any humans in your house whom your dog might “outrank”? _____

Describe why: _____

Where do you think your dog “ranks” in terms of dominance with other dogs? Dominant _____

Submissive _____ Middle _____ Why _____

Does your dog mount people? _____ Dogs? _____ How often? _____

Does your dog “mark” territory by lifting his/her leg to pee? _____ Inside homes? _____

Does your dog like riding in cars? _____ If not, what happens? _____

Any other info about anything mentioned or not mentioned above that would be helpful/important for us to know about your dog?



Rules and Requirements

Minimum Age: 3-5 months, predicated on completion of all vaccinations

Sex: All dogs must be spayed or neutered.

Shots: We require written proof of current vaccinations: Owners must submit veterinary certification that their dogs have received DHLPP, Rabies, and Bordetella (Kennel Cough) vaccinations within the last 5 days to 12 months. DHLPP specifically refers to the vaccine for Distemper, Hepatitis, Leptospirosis, Parainfluenza, and Parvovirus. Your dog must have had a fecal exam within the last year and current on flea, tick, and heartworm meds.

Health: All dogs must be in good health. Owners will need to certify that their dogs are in good health. DOG-MA may not be suitable for dogs with certain activity restrictions.

Behavior: All dogs must be non aggressive or protective. Owners will need to certify that their dogs have not harmed or shown any aggressive or threatening behavior and are comfortable being handled by staff.

Fee Schedule: Effective October 2008; all rates are subject to change without notice.

Daily Daycare Rate: \$35.00 per dog (up to 12 hours of service). Frequency discounts are available for at least 12 visits in one month (\$30/day); daily daycare packages for the month also available (\$540/month).

Overnight Service Rate: \$50.00 per night. You may drop your dog as soon as we open on the first day of boarding. An additional daycare fee is assessed for the final day based on pickup time after 12:00pm, (1pm on Sundays).

Payment Policy: Regular daycare schedules are booked and paid at the start of the month. Boarding stays are paid in full upon drop-off. Any boarding stays of over 5 nights, holiday, or summer boarding requires a non-refundable deposit of 50% in advance. **Dog-ma does not accept credit cards.**

Office Hours: 7am to 7pm weekdays, 9am-5pm Saturdays, 12noon-5pm Sundays. Currently, late pick-ups are available weekdays until 7:15pm for an additional charge of \$10 from 7:16-7:30 pm for a charge of \$20 if we are advised by phone. After 7:30pm weekdays or 5pm weekends, if we do not hear from you, your dog will be boarded at current rate. If you did not advise us, a late fee will still apply.

Cancellation Policy: Cancellations with less than 24 hours notice will be charge full fees. If a make up day is available that week, we can reschedule you if desired and apply the charge. No show will be charge and cannot be made up.

Signature of Owner _____ Date _____



<h2>Agreement</h2>

1. I understand and agree that in admitting my dog(s) to dog-ma, dog-ma has relied on my representation that my dog is in good health and has not harmed or shown aggressive or threatening behavior toward any person or any other dog.
2. Dog-ma makes every reasonable effort to protect dogs in their care. However, in the event of a problem, I understand and agree that Dog-ma and its staff will not be liable and I hereby release them of any liability of any kind arising from my dog(s) attendance and participation at the facility, or on errands or transport on owner's behalf. I thoroughly understand and accept these risks.
3. I further understand and agree that any problem that develops with my dog(s) will be treated as deemed best by staff of dog-ma in their sole discretion, and I assume full financial responsibility for any and all expenses involved for my dog in the case of illness or injury. However, I will make every effort to maintain responsibility for any harm caused by my dog at Dog-ma.
4. I understand that Dog-ma must maintain client confidentiality unless legally obligated to provide information, unless an owner gives permission.
5. I agree to pay my entire bill according to Dog-ma's payment policies.
Dog-ma accepts cash or local checks - we do not accept credit cards.

I certify that I have read and understand the rules and regulations set forth on the "Rules, Requirements and Agreements" page and that I have read and understand this agreement. I agree to abide by the rules and regulations and accept all the terms, conditions, and statements of this agreement. I certify that all of the information given to Dog-ma in this document is accurate to the best of my knowledge.

Print Owner's Name: _____

Signature of Owner: _____

Date: _____

Name(s) of Dog(s) _____



**Health & Temperament
Certification**

I, _____ hereby certify that my dog(s)

is in good health and have not been ill with any communicable disease in the last thirty (30) days.
I further certify that my dog(s) have not harmed or shown aggressive or threatening behavior toward
any person or any other dog.

Attached Veterinary Proof of Vaccination

Rabies expiration: _____

DHLPP expiration: _____

Bordatella expiration: _____

Fecal Float _____ Heartworm _____ Flea/Tick _____

Signature of Owner _____ Date _____