

Quick's Pooch Plaza

Boarding & Day Care Registration Information



Owner Information:

Name: _____ Address: _____

Phone numbers: Home: _____ Work: _____ Cell: _____

Email: _____ Is it appropriate to send updates to this email? Y / N

Emergency Contact - Other than yourself:

Name: _____ Home/ Work phone: _____

List any person authorized to pick-up your dog: _____

Pet Information:

Name: _____ Breed: _____ Sex: _____ Age: _____ Weight: _____

Birth date: _____

Veterinarian:

Name: _____ Phone: _____

Address: _____

General Information:

How did you hear about Quick's Pooch Plaza? _____

List any preferred days for Daycare: _____

Where did you get your dog? _____

Is your dog spayed/neutered? Yes / No Is your dog current on ALL vaccinations? Yes / No

Is your dog currently on heart-worm prevention? Yes / No Is your dog currently on a flea program? Yes / No

Is your dog on any medications? If so please list _____

What type of dog food do you feed your dog? _____

Is it okay to give your dog treats during the day? Yes / No

Is your dog allowed to have playtime and interact with other dogs? Yes / No

Are there restrictions that need to be placed on your dog's activities or movements? Yes / No

Does your dog have any allergies? Yes / No Does your dog like to be brushed? Yes / No

Do you regularly clean your dogs teeth Yes / No ,ears Yes / No or clip his/her nails Yes / No ?

Does your dog act afraid of any specific items or noises? _____

Are there any kinds of dogs your dog automatically fears or dislikes? _____

Where does your dog sleep at home? (In bed, crate, dog bed) _____

Has your dog ever: Growled at someone? Yes / No Bitten someone? Yes / No

Does your dog have any problems in any of the following areas:

Houstraining: ___ Barking: ___ Jumping: ___ Food Aggression: ___ Others: _____

Has your dog ever shared his/her food or toys with other animals? _____

Does your dog play with any toys? Yes / No

If yes, what kind of toys does your dog like and what games does he/she play? _____

How often does your dog meet new dogs it does not already know? _____

Has your dog ever been in a dog fight? Yes / No

Has your dog ever had any formal obedience training? Yes / No

If yes, when and where? _____

What commands does your dog know? _____

Does your dog know a bathroom: _____ quiet: _____ play command?: _____

Are you interested in private work-outs for your dog? Yes / No Please mark what you'd be interested in most:

Potty Training	Obedience – Basic, Advanced or Competition	Agility	Socialization	Manners in Public	Problem Behavior Modification
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Other comments about your dog that you feel might be helpful (e.g. Threatening Behavior, Aggression):

Health and Temperament Certification:

I, _____, hereby certify that my dog _____ is in good health and has not been ill with any communicable condition in the last 30 days.

I further certify that I have truthfully stated any threatening or aggressive behavior my dog has shown towards any person or any other dog.

Date: _____ Signature of Owner: _____

**Please attach copy of vet records showing dates of vaccinations and bordatella*

Terms and Conditions Agreement:

1. I understand that I am solely responsible for any harm caused by my dog while my dog is attending Daycare at Quick's Pooch Plaza or is using any other services provided by Quick's Pooch Plaza.
2. I further understand and agree in admitting my dog that Quick's Pooch Plaza has relied on my representation that my dog is in good health as well as the behavior information I have given of my dog toward any person or any other dog.
3. I further understand and agree that Quick's Pooch Plaza, Sabine & Bobby Quick and any volunteers will not be liable for any problems that develop provided reasonable care and precautions are followed. I hereby release Quick's Pooch Plaza, Sabine & Bobby Quick, their staff, and volunteers of any liability of any kind whatsoever arising from my dogs' attendance and participation of the activities at Quick's Pooch Plaza.
4. I further understand and agree that any problem that develops with my dog will be treated as deemed best by the staff at Quick's Pooch Plaza, in their sole discretion, and that I will assume full financial responsibility for any and all expenses involved. I authorize Quick's Pooch Plaza, to obtain medical records and/or treatments for my dog in the event of injury or illness from my veterinarian or from the closest veterinary clinic. By signing this document I further direct said veterinarian to provide such records upon request.
5. I further understand that if I fail to provide proof of current vaccinations or if my dogs' vaccinations are found to be expired or otherwise incomplete, Quick's Pooch Plaza has the right to refuse service until current proof is provided. If my dog arrives at the facility with fleas and/or other parasites, Quick's Pooch Plaza has the right to bathe and quarantine my dog until picked up by myself or my agent, and I take full responsibility for any expenses incurred for such reasons.
6. I further understand that my dog may experience minor cuts, scratches, and abrasions due to the nature of dog play. I realize that pads on paws may initially become sensitive, or bothered until my dog becomes used to running on different surfaces.
7. I further understand that Quick's Pooch Plaza is a place where animals co-mingle in groups and I am responsible for the medical treatment of any injuries that my dog receives while at Quick's Pooch Plaza.
8. I allow my dog to be photographed, videotaped, and/or used in any media or advertising without prior approval by me. All such photographs, etc. are the property of Sabine Quick and Quick's Pooch Plaza.

I certify that I have read and understand the terms and conditions set forth on this page, the application, and health forms. I agree to abide by the terms and conditions and accept all terms, conditions, and statements of this agreement.

Name of owner and dog (please print): _____

Signature of owner: _____ Date: _____

Boarding dates: Check in: _____ Pick-up: _____

Day Care: _____