

Owner Information

Name _____
Mailing address _____
E-mail _____
Home phone _____ Cell _____
Work _____
How did you hear about us? _____

Vaccine and Emergency Information

Vet's name _____
Vet's address _____
Vet's phone _____ Fax _____

It is the responsibility of the client to provide proof of vaccines.

Immunization Requirements - Dates given:

Distemper: _____ Bordetella: (every 6 months) _____

Rabies: _____ Parvovirus: _____

Pet owner must understand that even if owner's dog is vaccinated against canine cough (Bordetella), there is a chance that the dog can still contract canine cough.

Emergency contact name _____ Phone _____

Name _____ Phone _____

Pick- up Authorization

Please list person(s) allowed to pick up pets.

Name _____

Phone number _____

Name _____

Phone number _____

Name _____

Phone number _____

Under no circumstances will your pet be released to anyone other than the individuals listed without prior consent.

Temperament Information

Y N

1. Was your dog adopted from a shelter?
If no, where did you acquire your dog from? _____
2. How long have you had your dog? _____
3. Are there other pets in the home?
4. Is your dog comfortable with small children?
5. Has your dog ever been to daycare before?
If yes, how was his/her experience? _____
6. Has your dog ever been to a dog park?
If yes, how was his/her experience? _____
7. Has your dog ever bitten anyone?
If yes, explain _____
8. Has your dog ever bitten another dog?
If yes, explain _____
10. Does your dog get spooked from loud noises (thunder)?
11. Is your dog crate trained/housebroken?
12. Is your dog leash trained?
13. Has your dog received formal training?
14. Basic commands? (Sit, stay, lay down)
15. Does your dog try to escape by digging, jumping or fence climbing?
16. Does your dog enjoy toys?
17. Is your dog toy or food possessive?
If yes, explain _____
18. Has your dog shared toys/food/water with other dogs before?
19. On your dog is there an area that they don't liked to be touched?
If yes, explain _____
20. Does your dog receive exercise on a daily basis?
If yes, explain _____
21. When you are not at home where is your dog kept? _____
22. What energy level best describes your dog? Low Medium High

23. How would you rate your dog's social skills with other dogs inside your home?

Friendly Timid No interest Aggressive Other

If other, explain _____

24. How would you rate your dog's social skills with other dogs outside your home?

Friendly Timid No interest Aggressive Other

If other, explain _____

25. How would you rate your dog's social skills with people inside you home?

Friendly Timid No interest Aggressive Other

If other, explain _____

26. How would you rate your dog's social skills with people outside your home?

Friendly Timid No interest Aggressive Other

If other, explain _____

27. Is there anything else we should know about your per? _____

28. When would you like to start daycare? _____

To the best of my knowledge the above information is true.

Signature _____ Date _____

Pet Information

Name _____ Breed _____

Sex _____ Spayed/Neutered _____ Intact _____ Age _____

Micro-chipped _____ Color _____

Identifying marks _____

Name _____ Breed _____

Sex _____ Spayed/Neutered _____ Intact _____ Age _____

Micro-chipped _____ Color _____

Identifying marks _____

Dog daycare medical release form

This is a required form for all Gimmie a Bark daycare participants receiving services. First and foremost the safety and well being of your pet(s) is the highest importance. Insuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously. We do our best to have our pet parents screen for pre-existing health conditions but some factors may be beyond our control. In the event that a medical emergency arises while a pet is at our facility or participating in a service that we provide, it is imperative that we are immediately able to get them medical treatment at the closest available facility. We will call ahead to the veterinary offices in closest proximity geographically to us to insure they can handle the emergency present. Your pet will be rushed to the closest available facility for treatment and you will be notified. We notify the owner after we have secured a medical treatment center for the animal to avoid delays that may be caused by emotion on the part of the owner. Our goal is to get your pet medical attention as quickly as humanly possible, and any distractions may interfere with that process.

For that reason it is a requirement to have our pet parents sign this form.

I understand that in the event of a medical emergency, that Gimmie a Bark Daycare at its sole discretion, deems the need of immediate attention of a licensed veterinarian. I authorize Gimmie a Bark Daycare to seek medical attention at the closest available veterinary facility. I further agree that I am financially responsible for any medical treatment my pet(s) receives as a result of a medical emergency while attending services provided by Gimmie a Bark Daycare.

Pet owner signature _____

Date _____

Printed name _____

Gimmie a Bark Pet Care Agreement

Your name _____

Address _____

Home phone _____ cell _____

Dogs name(s) _____

1. I further understand that Gimmie a Bark Daycare, has relied upon my representation that my dog is in good health and has not injured or shown aggression or threatening behavior to any person or dog in admitting my dog for services at their facility.

2. I further understand that Gimmie a Bark Daycare, their owners, staff, partners and volunteers, will not be liable, financially or otherwise, for injuries to my dog, myself or any property of mine while my dog is participating in services provided by Gimmie a Bark Daycare. I hereby release Gimmie a Bark of any liability of any kind arising from my dogs participation in any and all services provided by Gimmie a Bark.

3. I further understand and agree that any problems with my dog, behavioral, medical or otherwise will be treated as deemed best by staff of Gimmie a Bark Daycare in their sole discretion, and in what they view as the best interest of the animal. I understand that I assume full financial responsibility and all liability for any and all expenses involved in regards to the behavior and health of my dog.

4. I further understand that there are risks and benefits associated with group socialization of dogs. I agree that the benefits outweigh the risks and that I accept the risk, I desire a socialized environment for my dog while attending services provided by Gimmie a Bark Daycare and while in their care. I understand that while the socialization and play is closely and carefully monitored by Gimmie a Bark staff to prevent injury, it is still possible that during the course of normal play my dog may receive minor nicks and scratches from roughhousing with other dogs. Any injuries to my dog will be pointed out by staff upon pick-up.

5. I understand by allowing my dog to participate in services offered by Gimmie a Bark Daycare I hereby agree to allow Gimmie a Bark to take photographs or use images of my pet in print form or otherwise for publications and promotion.

6. I further understand that I am solely responsible, financially or otherwise, for any harm or damage caused by my dog while my dog is attending any services provided by Gimmie a Bark Daycare.

7. I understand that if my dog is not picked up on time I hereby authorize Gimmie a Bark Daycare to take whatever action is deemed necessary for the continuing care of my dog. I will pay Gimmie a Bark Daycare the cost of any such continuing care upon demand by Gimmie a Bark Daycare. I understand that if I do not pick up my dog Gimmie a Bark will proceed according to the guidelines provided by Florida Statue 705.19 Abandonment of animals by owner; procedure for handling. I also acknowledge that I will be fully responsible for all attorney's fees and associated costs if I abandon by dog.

Signature of owner _____

Date _____

Printed Name _____