



- New Daycare/Boarding Applicant
- Additional Family Member
- Existing Member's Updated Information

Daycare & Boarding Application

Guardian's/Owner's Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____
 Email Address: _____

How did you hear about Pawmetto Lifeline Daycare & Boarding?

- Drive-By Website Mailer/Flyer Email Special Event
 Referral: Name: _____ Other: _____

Have you ever used Doggie Daycare/Overnight Boarding Services? No Yes, please list locations: _____

What are your primary reasons for using our Daycare/Boarding services?

- Socialization Travelling Work Long Hours Other: _____

Veterinarian Hospital: _____ Contact Name: _____ Phone: (____) _____
 Address: _____ City: _____ State: _____ Zip: _____

VACCINATIONS: Guardian/Owner is required to provide veterinary proof of current and updated Rabies, DHPP, and Bordatella as well as a negative Heartworm test

Emergency Contact Name: (someone not travelling with you) _____ Relationship: _____
 Home Phone: (____) _____ Cell Phone: (____) _____ Email: _____

CANINE QUESTIONS

Dog's Name: _____ Age: ____ Months Years Sex: Male Female
 Breed(s): _____ Color(s): _____ Weight: _____ lbs.
 Yes my pet is: Spayed Neutered No, my pet is not spayed/neutered (required to play & stay)

How long have you owned your dog? _____ Where did you get your dog? _____

How does your dog get along with other dogs? _____ Puppies? _____

How does your dog get along with other animals? _____

Does your dog react to any specific noises? If yes, please explain: _____

Does your dog have any automatic fears or dislikes? If yes, please list: _____

Does your dog have anywhere s/he does not like to be touched? _____

How does your dog react to strangers? _____

Has your dog ever bitten another dog? If yes, please explain: _____

Has your dog ever growled at another human? If yes, please explain: _____

Has your dog ever bitten another human? If yes, please explain: _____

Has your dog ever show aggression (growling or snapping) to anyone who has taken food, water, or toys away? If yes, please explain: _____

Does your dog have any physical or medical conditions we should be aware of (including allergies)? If yes, please explain: _____

Does your dog have any problems in the following areas?

- Bullying Barking Excessively Separation Anxiety Jumping/Climbing Fences
 Digging Destructive Behavior (toys, furniture, etc.)

How does your dog like to spend play-time (tennis balls, ropes, chase games, etc.)? _____

If your dog is not eating their food, do you have a preference on what we can offer to entice eating? _____

Is there anything else we should know about your dog? _____

Should an emergency arise, how much medical re would you like Pawmetto Lifeline to provide to your dog before contacting you?

- Provide any care needed. I understand I will be financially responsible for this care.
 Provide life-sustaining care, and then contact me for additional care authorization.
 DO NOT provide any medical care without contacting me for authorization.

I, _____, give permission for my pet's photo to be used by Pawmetto Lifeline for media purposes.

DAYCARE AND BOARDING AGREEMENT

I understand and agree that Pawmetto Lifeline Pet Daycare is a day service and that overnight stays are an additional fee. Daycare pets must be picked up by 6:30 PM (closing time), and if I fail to pick up my pet prior to that time, I will pay normal boarding charges until I do pick up my pet. Boarding pets must be picked up by 10:00 AM (or 4:30 PM on Sunday) or I will pay the full day's fee. These charges will be in addition to my expected fee.

_____ (Initial)

I understand that my dog will be interacting with other dogs in a supervised setting. While Pawmetto Lifeline does a thorough evaluation of every participant in the daycare, I realize that dogs can be unpredictable. I will not hold Pawmetto Lifeline, including all staff and volunteers, responsible for sickness, injury of or to my pet for any reason whatsoever. I realize that I am responsible for any damages that my pet may cause.

_____ (Initial)

Pawmetto Lifeline has my permission to have my pet treated by a veterinarian of their choice, should that need arise and I agree to pay for that care. If a medical emergency arises, I understand that they will follow the protocol outlined above. I will be responsible for paying any necessary medical care done by Pawmetto Lifeline when I pick up my pet.

_____ (Initial)

Should my pet be left for five (5) days without a signed boarding agreement, it shall be considered abandoned and will be discharged in any manner that Pawmetto Lifeline considers appropriate. I will still be responsible for any charges incurred during that time.

_____ (Initial)

Guardian/Owner Signature & Date: _____

_____ (date)

Pawmetto Lifeline Accepted this Application on: ____ / ____ / ____

Representative: _____