

Paws on the Duck Pet Resort and Salon

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PlayCare Application

Date: _____

Owner:

Dog's Name:

Dog's Age/ and Breed:

Emergency Phone:

Veterinarian:

Vet's Phone:

This application is intended to help determine your dog's best play setting and allow our staff to best fit your pet. This assessment is not a guarantee that your pet will be a good fit to any or all play groups.

What do you want your dog to get out of attending PlayCare?

Has your dog been a member of a professionally managed play group in the past? If so who's play group?

Has your dog had to be removed from any type of activity group in the past for any reason?

If so, why?

How would you best describe your dog's play style?

Describe your dogs level of socialization with other dogs.

Has your dog ever bitten another animal?

Has your dog ever been in a fight before?

If so, please describe what happened?

Has your dog ever bitten a person?

Please describe the circumstances when your pet might behave in an aggressive manner?

Please describe the circumstances when your dog might behave in a defensive manner?

How many other dogs does your dog like to play with?

What size is your dog's preferred play partner?

What is your dog's favorite type of toy?

What behaviors lead your dog to bark?

What behaviors lead your dog to growl?

How long of a period of active play does your dog enjoy?

How many days of play in the average week are you interested in your dog attending?

Is your dog able to tolerate play in the **heat**? Yes / No **Cold**? Yes / No

Is your dog trained to **Sit** Yes / No **Stay** Yes / No **Come** Yes / No?

Does your pet have any medical conditions that might limit group play activity?

Is your pet on any medication? If yes please list.

Would your dog participate in play activities on wet weather days outside? Yes / No

Is your dog on monthly flea/tick prevention? Yes / No