

**DAYCARE ENROLLMENT APPLICATION**

# Pet Owner Information

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name:

Street Address: City: Zip Code:\_\_\_\_\_\_\_\_\_

Home #: Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell #:

E-Mail:

# Pet Information

**Name:** Type: Dog Cat

|  |  |
| --- | --- |
| Breed:  |  Color:  |
| Sex: Male Neutered: Yes No  | Female Spayed: Yes No  |
| Birth Date: Age: Weight: \_\_\_\_\_\_\_\_\_  | lbs  |
| Distinguishing Characteristics:  |   |

Dog obtained from: Breeder Retail Store Adoption/Rescue Other

Background History:

**Name:** Type: Dog Cat

|  |  |
| --- | --- |
| Breed:  |  Color:  |
| Sex: Male Spayed: Yes No  | Female Neutered: Yes No  |
| Birth Date: Age: Weight:  | lbs Height: “ Length: “  |
| Distinguishing Characteristics:  |   |

Dog obtained from: Breeder Retail Store Adoption/Rescue Other

# Veterinarian Information

Hospital/Clinic Name:

Address: City: Zip Code:

Phone: Fax :

Veterinarian Name:

**Vaccination Information** (attach copy of current vaccination records administered by a veterinarian)

Dates Administered Dates Expired

 Rabies:

 Distemper: Bordetella:

# Health/Medical Issues

Does your dog have any health issues? Yes No; If yes, explain:

Does your dog have any physical issues? Yes No; If yes, explain:

Does your dog have any allergies? Yes No; If yes, explain:

Does your dog require any medications? Yes No; If yes, explain:

Has your dog had any disease, illness or surgery within the last 6 months? Yes No; If yes, explain:

Tell us any other information or concerns about your dog’s health?

# Medications

During your dog’s stay with us, we will administer medications and dietary supplements as instructed by you and or your veterinarian. There will be an additional charge for administering medications.

# Behavior/Temperament

Has your dog ever (if applies, explain circumstances):

Growled/snapped at someone? :

Bitten someone? :

Jumped a fence or run away? :

Experienced group play? :

Shown aggression toward other dogs? :

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

 Jumping on people Easily Frightened Constant Barking Digging Aggression

 Destructive Disobedient Explain:

Has your dog ever growled or snapped at anyone who has taken his food or toys away?

Are there any types of people (male, female, kids, etc.) your dog fears or dislikes?

Are there any types of dogs (large, small, male, etc.) your dog fears or dislikes? Share any other comments about your dog’s behavior that might be helpful to know:

# Training

Has your dog ever received any formal training? No Yes; Describe:

What commands does your dog know?

# Diets

At Lake Forest Kennel Club, we serve our guests Kirkland lamb, veggie and rice kibble. Our goal is to provide all our guests with healthy, nutritious meals designed to maximize enjoyment during their stay with us. We also reward our guests with occasional treats. However, should you desire that your dog eat his own brand/type of food or treats, please let us know and we will follow your instructions.

Whose food would you like your dog to eat? Ours Yours Either

Is it okay to give your dog occasional treats? Yes No

Additional Diet Details:

# Socialization

Dogs are social and curious animals by nature and enjoy the ability to roam freely exploring its surroundings. At Lake Forest Kennel Club, we offer our guests three beautiful acres of grassy area to do what comes natural to them. Whether it’s playing with other dogs, running freely, or just strolling about, we encourage them to have fun, move about and enjoy the outdoors. The social interaction, exercise and fresh air are good for them. After a day with us, your dog should go home refreshed and mildly tired from an active fun-filled day.

Would you like your dog to socialize with other dogs? Yes No

Additional Details:

# Emergency Contact

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:

Address:

Home #: Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell #:

 **Print Owner’s Name**  **Print Dog (s) Name**

#  Owner’s Signature Today’s Date