## Application and Waiver Forms

These forms must be filled out in full, dated, signed, and approved by the daycare prior to your dog’s trial day. Date:

### Dog Information:

|  |  |
| --- | --- |
| Dog’s name |  |
| Dog Breed: Color: |  |
| Birthdate (year):  | Sex: Male [ ] Female [ ] |
| Spayed/ Neutered? No |  |
| How did you hear about us? |  |

**Owner Information:**

|  |  |
| --- | --- |
| Owner Name(s):  | Address: |
| City: Postal Code: | Home Phone: Cell Phone: |
| Email: |  |

### Authorized Persons:

The following are the names of individuals that have your permission to pick up your dog from Bark Place

|  |
| --- |
| Authorized Individuals: |
| Name: Name: |

### Emergency Information:

|  |  |
| --- | --- |
| Emergency Contact Name: Phone: (h) (c) |  |
| Primary Veterinary Clinic: Clinic Address: |  |
| Clinic Phone: |  |

### Vaccinations

* All dogs must have ALL vaccinations up to date. Owners must submit written proof of all vaccinations including Kennel
* Cough. We strongly recommend all dogs be on a flea/tick/lice prevention program.
* Is your dog being fed at daycare? Yes [ ] No [ ]
* If yes, please specify the time and amount of food. You are responsible for supplying your dog’s food:

### Medications: Allergies:

Physical limitations or health problems:

\*Please note, if your dog has been ill with a communicable or potentially communicable disease within the past 30

days a health clearance signed by a licensed veterinarian must be received before your dog can attend daycare.

Please do not bring ill (vomiting, diarrhea, eye/ear infections) or injured (sore, limping etc) dogs to daycare.

### Has your dog ever…? (If yes, please describe)

* Growled at someone:
* Bitten or snapped at a person:
* Reacted negatively when food or toys are taken:
* Been in a fight with another dog:
* Does your dog have any problems in the following areas? Check all that apply.
* Mouthiness on hands or clothing [ ]
* Housetraining [ ]
* Excessive Barking [ ]
* Fence Jumping [ ]
* Digging [ ]
* Coprophagia (feces eating)
* [ ] Destructive chewing [ ]
* Separation Anxiety [ ]
* Jumping Up [ ]

### Daycare Rules and Regulations:

1. We accept dogs of all ages. Puppies must be over 12 weeks and on a vaccination program.
2. Puppies or shelter dogs must have been in the home for at least two weeks prior to attending

daycare.

1. All dogs require up to date vaccinations. Proof of vaccination is required.
2. Dogs that are currently ill or injured are not permitted at daycare. Owners certify by

signing this application that their dogs are in good health.

1. We do not accept unneutered males over one year in age and unspayed females that are

pregnant or in heat.

1. All dogs must be non-aggressive and not food or toy possessive. Owners certify by signing this

application that their dog has no history of harming or threatening another animal or person.

1. Pick-ups must be completed by 6:00PM. (5 pm on Weekends) Late fees for late pick-ups apply at a

rate of $15.00 for every 15 minutes past the closing time. Or $20 every 5 minutes passed closing time on weekends.

### Waiver and Agreement

1. I hereby represent that I am the legal owner of the dog(s) described above to use the services provided by Bark Place.
2. I hereby waive and release Bark Place, its employees, directors, owners, and agents from all liability which my dog(s) may suffer, including specifically, but not without limitation, any injury or damage whatsoever arising from the dog(s) attendance and participation of services provided by Bark Place.
3. I hereby agree to indemnify and hold harmless Bark Place it’s employees, directors, owners, and agents from all claims by any member of my family or any other person accompanying me to a function of Bark Place or while attending the premises thereof, because of any action by any dog.
4. I hereby represent that my dog(s) is in good health and has not been ill with any known contagious diseases within the past 30 days.
5. I recognize that the health of the dog(s) is the owner’s responsibility. I hereby represent that all required vaccinations (rabies, Bordetella, distemper, and parvovirus) are up to date. I will also continue to ensure that the required vaccinations will be kept up to date for as long as my dog(s) attends Dog’s Day Pet Care. In addition, I hereby represent that my dogs have flea/tick preventative treatments applied regularly.
6. I further understand and agree that in admitting my dog(s), Bark Place has relied on my representation that my dog(s) is in good health and has not harmed, shown aggression or threatening behavior towards any other person or any other dog.
7. I further understand and agree that Bark Place and their caregivers will not be held liable for any problems that might develop with my dog(s) including, but not limited to sickness, disease, injury, running away and death, provided that reasonable care and precautions are followed.
8. I understand and agree that any problem that develops with my dog(s) will be treated as deemed best by the caregivers of Bark Place at their sole discretion and that I assume full financial responsibility for any and all expenses incurred.
9. Bark Place fees and packages are non-refundable and non-transferable.
10. I agree that my dog(s) may be videotaped, photographed and or recorded. Bark Place shall be the exclusive owner to the results and all proceeds of such media.
11. Bark Place reserves the right to permanently remove a dog from care at any time to ensure the safety of other dogs as well as staff.
12. In the event of an emergency and after Bark Place has contacted me, I authorize Bark Place to transport my dog to a veterinarian of choice and authorize treatment. I agree to be responsible for all charges including, but not limited to, vet fees, extra visit fees and transportation fees. I agree that Bark Place is released from all liability related to transportation from/ to veterinarian and treatment for sickness or emergency.
13. I understand that the rules above apply to any dog(s) of mine attending daycare, grooming and boarding

Print Name:

Signature: Date: