

HOT DIGGITY HOUND APPLICATION

How Did you Hear About Us? _____

Your Name: _____

Address: _____ City, _____ State, _____ Zip, _____.

Home Phone () _____ - _____ Work Phone () _____ - _____ .Cell () _____ - _____

Work () _____ - _____ Email Address: _____

In Case of Emergency (Contact)

Name: _____

Address: _____ City, _____ State, _____ Zip, _____.

Home Phone () _____ - _____ Work Phone () _____ - _____.

Veterinarian:

Name: _____ Phone () _____ - _____.

Address: _____ City, _____ State, _____ Zip, _____.

PET INFORMATION

Name: _____ Sex: M / F Spayed/Neutered Y / N

Age: _____ Birthday: _____ Breed: _____

Color: _____ Weight: _____ Micro Chip Y / N # _____

Feeding Schedule: _____

Brand and Type of Food: _____

Is your dog allowed to have treats? Y / N (if yes, what type) _____

Where did you get this dog? _____

How long have you had him/her? _____

If you have not had him/her from puppy hood, What do you know of its prior history?

Are there any other animals in the household? (Species/ Breed / Age)

What is the make-up of your household?

Adult Males _____ Adult Females _____ Children/Ages _____

Which family member is your dog most fond of? _____

Which sex is your dog most fond of? M / F

Please describe your dogs overall temperament: _____

How does your dog react to other dogs? (Generally) _____

(Inside your home) _____

Has your dog ever participated in play at a dog park? Y / N

If yes how did he/she react with the other dogs? _____

How does your dog react to strangers? _____

Does your dog have any kinds of people he/she automatically fears or dislikes? Y / N

If yes describe: _____

Does your dog have any kinds of dog that he/she automatically fears or dislikes? Y / N

If yes describe: _____

Has your dog ever bitten someone? Y / N

If yes describe: _____

Has your dog ever been in a fight or bitten another dog? Y / N

If yes describe: _____

Has your dog ever escaped or attempted to escape by digging/jumping or climbing fences? Y / N

If yes describe: _____

Does your dog jump on people? Y / N

If yes describe: _____

Do you walk your dog? Y / N How often? _____ Distance? _____

What other exercise does your dog receive? _____
_____ How often? _____

What known behavioral problems does your dog have? _____

Does your dog have a circumstance or situation that he/she is frightened of? Y / N

If yes describe: _____

Describe how you would calm the dog during this situation: _____

Is your dog housebroken or crate trained? _____

Does your dog play with toys? Y / N What kind? _____

Is your dog toy possessive? Y / N Describe: _____

Has your dog shared toys/food/water with other dogs before? Y / N

Where there any problems? _____

Has your dog ever played on playground or agility equipment before? Y / N

Do you feel that play equipment would be inappropriate for your dog? Y / N

Describe: _____

Does your dog prefer a particular sex of dog?

Describe: _____

Has your dog ever received any formal training? Y / N

Where and When? _____

Does your dog know any commands? Y / N Describe: _____

What special commands does your dog know? _____

Bathroom Command: _____ Quiet Command: _____

Play Command: _____

What do you do with him/her when you leave the home? _____

How does he/she react when you get home? _____

Does your dog have any health concerns that you are aware of? Y / N

Describe: _____

Does your dog have any medical restrictions on his/her activities? Y / N Describe: _____

Is your dog currently on any medication? Y / N Describe: _____

Does your dog have any allergies? Y / N Describe: _____

Does your dog like to receive brushings? Y / N How often is he/she brushed? _____

How does your dog react to getting his/her nails clipped? _____

Does your dog have any areas on his/her body that he/she does not like to be touched? Y / N

Describe: _____

Does your dog have a special place that he/she likes to be petted or rubbed? Y / N

Describe: _____

Does your dog receive flea and tick preventative? Y / N

Brand: _____ Type: _____ Frequency: _____

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

HOT DIGGITY DOG DAYCARE & BOARDING

PET CARE AGREEMENT

Your Name: _____

Address: _____ City, _____ State, _____ Zip, _____.

Home Phone () _____ - _____ Work Phone () _____ - _____.

Dogs Name: _____ Age: _____ Breed: _____

1. I further understand that Hot Diggity Hound 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 Hot Diggity Hound, 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 Hot Diggity Hound. I hereby release Hot Diggity Hound of any liability of any kind arising from my dogs participation in any and all services provided by Hot Diggity Hound.
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 Hot Diggity Hound 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 Hot Diggity Hound and while in their care. I understand that while the socialization and play is closely and carefully monitored by Hot Diggity Hound 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 Hot Diggity Hound I hereby agree to allow Hot Diggity Hound to take photographs or use images of my pet in print form or otherwise for publication and/or 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 Hot Diggity Hound.
7. I understand that if my dog is not picked up on time or by a date specified in a separate agreement, I hereby authorized Hot Diggity Hound to take whatever action is deemed necessary for the continuing care of my dog. I will pay Hot Diggity Hound the cost of any such continuing care upon demand by Hot Diggity Hound. I understand that if I do not pick up my animal, Hot Diggity Hound will proceed according to the guidelines provided by California Statute 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 my dog.

Signature of Owner _____ Date _____

Printed Name _____

HOT DIGGITY DOG DAYCARE & BOARDING

MEDICAL RELEASE FORM

This is a required form for all Hot Diggity Hound participants receiving services.

First and foremost the safety and well being of your pet(s) is of 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 Hot Diggity Hound at its sole discretion deems to need the immediate attention of a licensed veterinarian. I authorize Hot Diggity Hound 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 Hot Diggity Hound.

Signature of Owner _____ Date _____

Printed Name _____