Style Mutt

Day Care Application



Day care is a cage-free service designed for social dogs to play and have fun. Safety is our primary goal, therefore, **day care is not for every dog.** It is not a place for aggressive dogs to learn how to be social. To be accepted into our day care program, each potential day care guest must:

1. Complete this Day Care Application/Agreement

2. Meet our vaccination and temperament standards

3. Be spayed or neutered (except puppies under 6 months)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CLIENT PROFILE** \_

Owner’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_

Home (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMERGENCY CONTACT(S)**:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship\_\_\_\_\_\_\_\_\_

Others authorized to pick-up my pet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinary Clinic of Record\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clinic Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **PET PROFILE**  \_

Pet Guest’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nickname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Color\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: Male Female Spayed Neutered Approximate Weight \_\_\_\_\_\_

Birthdate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How long have you had this pet?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This pet is from: Rescue Store Breeder Stray Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **MEDICAL INFORMATION** \_

Last physical exam:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DHLPPC (or equivalent):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rabies Vaccination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 1 year 3 Years

Bordatella:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Heartworm Test:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Heartworm Prevention\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Flea Prevention:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Purchase Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Fecal Exam:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your pet have any old or current injuries/health concerns that require special attention? Yes No

If yes, please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your dog have hip dysplasia? Yes No

If yes, are there any restrictions on your dog’s activities or movements:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your pet taking any medication(s)? Yes No

If yes, please name the medication(s) and the reason(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PERSONALITY PROFILE** \_

(Things to know about my dog because you’ll find out anyway)

**ATTRIBUTES PERSONALITY BEHAVIOR**

Fence climber Outgoing Will Bite

Digger Verbally Sensitive May Bite

Jumps Timid Growls

Protective Affectionate Snaps

Mouthy Pushy Shows teeth

Fear of Noise/thunder Aggressive Freezes

House broken Excitable Trembles

Paper trained Playful Moves Away

Afraid of men Independent A perfect angel

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MY PET: LIKES DISLIKES PLAYS BEST WITH:**

Grabbing collar No dogs

Getting hugs Big dogs

Being brushed Little dogs

Being around other dogs Older dogs

Being touched while sleeping Younger dogs

Being touched on ears Puppies

Being touched on paws

Being touched on mouth

Being touched on tail

Having nails clipped

Does your pet engage in any unusual or repetitive behaviors? Yes No

If yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your pet ever bitten a person? Yes No

Has your pet ever bitten another dog? Yes No

Additional information I would like you to know about my pet:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ **DAY CARE AGREEMENT** \_

To ensure the health and safety of your dog and all other guests, we require that all of our clients comply with the following terms and conditions:

1. I specifically represent to Style Mutt that I am the legal owner of my dog. In addition, my dog is healthy, my dog meets Style Mutt’s published vaccination standards, my dog has not harmed or shown aggression or threatening behavior towards any person(s) or other dog(s) and has not been exposed to any known communicable disease within the thirty day period immediately prior to services. I further represent that each time my dog is brought to Style Mutt, I will be recertifying that my dog is in good health and has not had any communicable illness of any kind for 30 days prior to admission. I further agree to inform Style Mutt of any changes in my dog’s condition and/or behavior prior to subsequent services.

2. I understand that my dog must be spayed or neutered prior to attending day care (if 6 months of age or older). In addition, I am not permitted to bring personal items to day care.

3. I understand day care is offered between 7 AM – 5 PM. Dogs not picked up by closing time (5 PM) will be charged $10.00 for every 15 minutes after 5 PM.

4. I understand that day care at Style Mutt is a cage-free service. I accept the risks involved and agree that I am solely responsible for any damages that result from injuries caused by my dog while at Style Mutt. I further understand and agree that any problems that develop with my dog will be treated as deemed best by the staff of Style Mutt, in their sole discretion. I authorize Style Mutt to do whatever is deemed necessary for the safety, health and well-being of my dog and I agree to assume full financial responsibility for any and all medical expenses incurred. I expressively wave and relinquish any and all claims against Style Mutt, its employees and representatives, provided reasonable care and precautions are followed. Under no circumstances will Style Mutt be liable for consequential damages or damages beyond the replacement value of my dog.

5. I understand Style Mutt reserves the right to refuse admittance to any dog that lacks proof of vaccinations, displays signs of untreated or potentially contagious conditions, demonstrates aggressive behavior, or who fails our standard health and temperament policies.

I certify that I have read, understand and will abide by the rules and regulations as set forth in this Agreement.

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Signature of Owner Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date