

Dog Days Doggie Day Care, LLC

Rio Rancho's First Doggie Day Care Facility
 2612 Southern Blvd., Suite F
 Rio Rancho, New Mexico 87124
 (505) 892-3644

Application and Pet Profile

Office use only:	<u>enrollment</u>	<u>Shots</u>	<u>Screened</u>	<u>In Computer</u>	<u>Folder made</u>	<u>1st Day</u>
Owner Name:				Today's Date:		
Address:		City:		State/Zip:		
Home Phone:		Work Phone:		Cell Phone:		
Emergency Contact:				Phone:		
Others you authorize to pick up your dog from day care:						
Veterinarian:				Clinic:		
Clinic Address:				Clinic Phone:		
<i>If, in the event of an emergency, all reasonable attempts to contact your primary veterinarian are unsuccessful, DDDDC, LLC reserves the right to transport your dog to an emergency vet.</i>						
Dog Name:			Breed:			
Sex:	<u>Male</u>	<u>Female</u>	Age:	Birth date:		
Is your dog spayed or neutered?	<u>Yes</u>	<u>No</u>	How long has dog lived with you?			
If adopted/rescued, do you have knowledge of your dog's history?				<u>Yes</u>	<u>No</u>	
Please provide brief description of dog's condition when adopted/rescued:						
Care and Health Information:						
Are dog's vaccinations current?		<u>Yes</u>	<u>No</u>	Owners are required to provide proof of current vaccinations (distemper, rabies, para influenza, parvovirus & bordatella).		
Does your dog need to be given medication?		<u>Yes</u>	<u>No</u>	Medication:		
Detailed instructions for giving medications, allergies or sensitivities:						
Does your dog have any physical limitations such as hip dysphasia?				<u>Yes</u>	<u>No</u>	
If yes, what restrictions should be placed on your dog's activities/movements?						

Grooming:			
Does your dog like to be brushed/combed?	Yes	No	
Describe any sensitive areas on his/her body.			
Where are your dog's favorite petting spots?			
Behavior:			
Describe your dog's behavior around children?			
Are there other pets in your household?	If yes, list types:		
How does your dog get along with other pets?			
Does your dog act afraid of certain items or noises?			
Describe how your dog reacts to strangers entering your home or yard:			
Does your dog bark or growl at anyone passing by your home or yard area.	Yes	No	
Describe any type of people your dog automatically fears or dislikes:			
How does your dog react to puppies?			
Has your dog ever bitten someone?	If yes, describe:		
Does your dog have any problems in the following areas: (If so, please explain)			
Mouthing:	Housetraining:		
Barking:	Digging:		
Jumping:	Other:		
Has your dog ever growled or snapped at anyone near their food or toys?			
Describe:			
Does your dog play with toys?	Yes	No	Favorite toy:
Has your dog ever been in a crate/cage?	Yes	No	
Has your dog had obedience training?	Yes	No	
What commands does your dog know?			
Comments about your dog that might be helpful for our staff :			