

CoCo's Canine Club Doggy Daycare Client Form

Your Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (H) _____ (W) _____
Cell: _____
E-mail address: _____

Vet Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

Emergency Contact (other than vet):

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (H) _____ (W) _____
Cell: _____

Dog's name, breed and age (please include their birthday):

Medical History:

Medication:

Special Instructions:

Price Per Day: _____ Weekly Rate: _____ Monthly Rate: _____
Additional Dog(s) Discount: _____ (Please see price sheet)

Is your dog allowed to have biscuits? Yes: _____ No: _____

As owner of the above said pet(s), I hereby give consent for emergency medical care as prescribed by a duly licensed veterinarian. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my pet.

Signature: _____ Date: _____

CoCo's Canine Club Doggy Daycare Client Transportation Release

Your Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____

Cell: _____ E-mail address: _____

Pick-up destination: _____

Cross streets: _____

Pick-up time preferred: _____ AM / PM

Drop Off Destination: _____

Cross streets: _____

Drop off time preferred: _____ AM / PM

We will try our best to accommodate your pick-up and drop off time request. Time may vary according to availability.

Price Each Way: _____ Price Round Trip: _____ Weekly Rate: _____

Monthly Rate: _____

Dog's name, breed and age

Special Instructions:

Does your dog(s) get motion sickness? Yes / No

Does your dog(s) need to be crated in the car? Yes / No

Does your dog(s) show aggression to other cars and/or people while driving? Yes / No

Will your dog(s) show aggression to other dogs in the car? Yes / No

If yes to any of the above please explain here: _____

As owner of the above said pet(s), I hereby give consent for pick up and/or drop off to **COCO'S CANINE CLUB DOGGY DAYCARE**. I also give consent for emergency medical care as prescribed by a duly licensed veterinarian. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my pet.

Signature: _____ Date: _____

CoCo's Canine Club Doggy Daycare

Additional Information on Your Pet

Has your dog been in day care before? Yes___ No___

If yes when, for how long and reason for leaving? _____

Has your dog been socialized with other dogs? Yes___ No___

Has your dog been socialized with men and women? Yes___ No___

Is your dog aggressive with strangers? Yes___ No___

Is your dog aggressive on walks towards people? Yes___ No___

Is your dog aggressive on walks towards other animals? Yes___ No___

Is your dog spayed or neutered? Yes___ No___

Does your dog have any allergies? Yes___ No___

If yes please list them. _____

Is your dog on a flea treatment? Yes___ No___

If yes what kind. _____

Please give the dates and expiration of the following vaccinations:

DHLPP: _____ / _____ Bordetella: _____ / _____

Rabies: _____ / _____

Has your dog been in training classes and /or private? Yes___ No___

If yes by who, when and for how long. _____

Please check what applies to your pet.

Problems	Dog aggressive___	People aggressive___	Jumps up___
Chews___	Digs___	Barks___	
Runs away___	Unruly___	Escapes___	
High jumper___	Shy___	No obey___	
Toy possessive___	People possessive___	Separation anxiety___	
Stool eater___	Picky eater___	Housesoils___	
Other___			

Is there anything else we need to know about your dog? _____

How did you hear about us? _____

CoCo's Canine Club Doggy Daycare HOLD HARMLESS / RELEASE AGREEMENT

Coco's Canine Club, its owner, employee(s), representative(s) or any other person(s) affiliated with the company shall hereinafter be referred to as "**Coco's Canine Club**."

By signing this form, you or your representative(s) _____ (print name) shall hereinafter be referred to as "CLIENT," and agree not to hold "**Coco's Canine Club**" liable or sue for any injuries and/or death to my dog(s) _____ (print dog's name) while in the care of "**Coco's Canine Club**."

Although, **Coco's Canine Club** screens the dogs for temperament, watch the dogs carefully, and **do not** take aggressive dogs, day care can be hazardous due to dogs playing together. They can get rambunctious at times and we cannot be held responsible for injuries and/or death that may occur in and out of the day care including the transporting of animals.

If in my absence, my pet should be come ill or injured, or in need of veterinary care, **Coco's Canine Club** has my permission to consult with my veterinarian and I realize that **Coco's Canine Club** will make a reasonable effort to bring your animal to its stated veterinarian. If my pet should require immediate care, I hereby give **Coco's Canine Club** permission to bring my pet to **Coco's Canine Club** associate veterinarians' facilities. I understand that I am responsibility for all veterinary costs, including the transportation of my pet to and from the veterinarian.

I understand that my dog will be walked on a daily basis at **Coco's Canine Club** and will have a choke chain as a back up method for safety. If I waive this policy, I will not hold **Coco's Canine Club** or its employees responsible if my dog should get loose on a walk or lost.

I hereby declare that my animal has not been exposed to any communicable diseases within the last 30 days, and is fully vaccinated in accordance with **Coco's Canine Club** policy.

I understand that **Coco's Canine Club** cannot be held responsible for lost, dirty, damaged, or destroyed belongings left in **Coco's Canine Club** care.

By signing this form, you acknowledge that you understand and accept the terms and conditions set forth by this agreement.

"CLIENT" _____ DATE: _____

Print Name _____

"Coco's Canine Club" _____ DATE: _____

Print Name _____