



ENROLLMENT FORM

We are excited your dog will be joining the fun here at C. DogLady! Please fill out the forms below, save and email to cdoglady@icloud.com or bring them to the C. DogLady location. Please bring vaccination records with you or your veterinarian's office may email them ahead of your appointment.

Pet Parent Profile

Pet Parent #1: _____ Cell Phone: _____

Address: _____

Home Phone: _____ Email: _____

Employer: _____ Work Number: _____

Please check if you DO NOT wish to receive C. DogLady updates and special offers via email. We do not sell information to third parties.

Pet Parent #1: _____ Cell Phone: _____

Address: _____

Home Phone: _____ Email: _____

Employer: _____ Work Number: _____

Please check if you DO NOT wish to receive C. DogLady updates and special offers via email. We do not sell information to third parties.

Emergency Contact

(if owner(s) cannot be reached)

Name: _____ Phone: _____

Relation to Family: _____ Email: _____

Veterinarian

Veterinarian Name: _____ Hospital Name: _____

Phone Number: _____ City & State: _____

(In the event of an emergency, you will be notified and your dog will be taken to the nearest vet.)

How did you hear about us?

(check all that apply)

Community Event* Rescue/Shelter* Internet Search Advertisement Article/TV News
Veterinarian/Trainer* Drive-by Existing Client* Other*

*Please Specify: _____

PET PARENT AGREEMENT

I, _____, hereby certify that my dog, _____ is in good health, have not been ill with any communicable diseases or parasites in the last 30 days, and have not harmed or shown aggressive or threatening behavior towards any person or any other dog. I also have read and understand and agree to the following:

1. **Inherent Risks of Play, Spa & Grooming.** I understand that C. DogLady is an open-play environment and because of this there are inherent risks, which even when closely monitored, may result in the following:

- a. Transfer of communicable parasites or an illness such as, but not limited to, the canine papilloma virus also known as “puppy warts,” or an upper respiratory illness like Kennel Cough, which can be caused by a contagious bacteria or virus.
- b. Injuries, usually benign, such as broken nails, sore pads, puncture wounds, abrasions and cuts, particularly in shorter coated breeds, etc.
- c. Behavioral problems.

I also understand that if my dog(s) has/have spa or grooming services, my dog(s) is/are at inherent risk for skin irritation, shampoo in eyes, risk of cuts, nicks, scratches, cutting of the nail quick, etc.

2. **Pet Health Issues While at C. DogLady.** If health or behavioral problems develop with my dog(s), that these will be treated as deemed best by the staff of C. DogLady within their sole discretion, and that I assume full financial responsibility for any and all expenses involved. If my dog(s) become(s) ill or injured, or is suspected to be ill or injured, or if for any other reason veterinary care is indicated, I authorize C. DogLady to seek and provide veterinary care from my designated veterinarian or a veterinarian of their choice. If my dog’s condition is emergent, I understand C. DogLady will seek care at the closest veterinarian office location. During my absence, C. DogLady will be caring for my dog. In the event of an emergency, I authorize the release of all medical records pertaining to the medical needs of my dog(s) to C. DogLady, LLC and all subsidiaries. I give representatives of C. DogLady authorization to communicate with said veterinarian regarding, diagnosis, prognosis and treatment of my dog(s). _____(Initial)

In the rare and unfortunate event that my dog becomes deceased while in C. DogLady’s care, my dog will be taken to my designated veterinarian and maintained for pick-up or further instruction. If a necropsy is performed, I give permission for the veterinarian to release any and all findings to C. DogLady, LLC and all subsidiaries. _____(Initial)

3. **Liability Release.** C. DogLady and their team will not be liable for any health or behavioral problems that develop in my dog(s), and I hereby release them of any liability of any kind whatsoever arising from my dog(s) attendance and participation at C. DogLady. I am solely responsible for any harm, including to any other dog(s), to the employees or invitees of C. DogLady, or to the equipment, physical plant, or other property of C. DogLady, caused by my dog(s) while my dog(s) is/are attending C. DogLady.

4. **Preventative Maintenance Commitment.** I agree to maintain regular flea, tick, and heartworm preventative maintenance programs for as long as my dog(s) has/have active attendance and participation at C. DogLady.

5. **Photography Release.** Photographs or other graphic, sound, or other image, likeness, recording, etc., may be made of my dog(s) by C. DogLady and that such may be used for any purpose without compensation, and I release to C. DogLady all rights that I may possess or claim to such image, likeness, recording, etc.

6. **Fees & Payments.** Payment is required when services are rendered.

7. **Hours of Operations & Late Pick-Up Fees.** Please refer to our brochure or website for store hours. We reserve the right to impose a late fee for dogs picked up after regular business hours. If your dog is not picked-up within 30 minutes of closing, we will assume that you are boarding and will impose an overnight boarding charge. I have read and understood all terms of this agreement.

SIGNATURE

DATE

PRINT NAME

DATE

PICK-UP PERMISSION LIST

Name: _____
Relation to dog: _____
Phone: _____
Email: _____

Name: _____
Relation to dog: _____
Phone: _____
Email: _____

Name: _____
Relation to dog: _____
Phone: _____
Email: _____

Name: _____
Relation to dog: _____
Phone: _____
Email: _____

I acknowledge that by listing this/these person(s) as authorized to pick up I am relieving C. DogLady of all liabilities in giving this person my dog(s).

SIGNATURE

DATE

PRINTED NAME

DATE

PET PROFILE

Dog's Name: _____ Breed/Description: _____
Date of Birth: _____ Weight: _____ Sex Female Male
Color: _____ Altered: Yes No Too young to neutered/spayed
(All dogs over the age of 7 months old, or those exhibiting early onset adolescence, must be spayed/neutered.)

Where did you acquire your dog? Breeder Rescue/Shelter Re-homed Found
Additional Info: _____ Date Acquired: _____
What type of food is your dog fed? _____ How much? _____
How often? _____ Does your dog have any known allergies? _____
May we offer your dog treats? Yes No

Behavior & Animal Interactions

(check all that apply)

Has attended daycare Toy play permitted in an open-play environment Allowed to have treats Can food or toys be taken away from your dog without difficulty? _____
 Goes to the dog park Altercation with a dog Growled / snapped at another dog or human
How does your dog react to other dogs approaching when you're on a walk?
 On Leash: _____ Off Leash: _____
How does your dog react to dogs that are much larger or much smaller? _____
 Displays leash aggression Climbs / Jumps fences **
 Displays separation anxiety Has bitten someone Has formal training Prone to eating stool or foreign objects ** Fearful/Shown Aggression toward a dog or human
 Dislike or fear of any particular kind of dog or human attribute (e.g. herding dogs, men, mustache, hats) **
** Please explain any behaviors listed above: _____
 Lives with other household pets. If so, describe the dog's interactions with them: _____

Any changes in your life that may affect your dog's behavior (e.g. new home, new pet, etc): _____

Any parts of your dog's body that they don't like touched: _____

Special words or phrases used with your dog: _____

PET HEALTH HISTORY

(check any that have occurred in the last 6 months)

- Ear Infections Eye Infections Allergies Gastritis/Bloat Heartworms Tapeworms
 Canine Cough Heat Stroke Seizures

Additional Health Concerns

- Heart Vision Hearing Skin Hip/Bone
 Surgeries: _____
 Regular Medications: _____
 Does your dog have any medical condition or other instance that would make it necessary to limit their physical activity? _____

Preventative Health Maintenance

(please indicate brand used)

- Current flea and tick preventative: _____
 Current heartworm preventative: _____

Pet Services

Services Interested in:

- Daycare Boarding Spa Grooming Other: _____

If your dog is receiving spa or grooming services, would you like us to use pet cologne? Yes No Does your dog have any known allergies to any pet spa or grooming products? _____