



APPLICATION

Dog Information:

Name: _____ M/F Spayed/Neutered? _____
(circle one)

Breed: _____

Color(s): _____

Weight: _____

DOB: _____

(even if you don't know the exact date, please approximate)

Rescue/Shelter Dog? If so, adopted when? _____

Human Information:

Name: _____

Address: _____

Phone(s): please list in the order we should try to reach you in the event of an emergency:

Email Address: _____

How did you hear about us? Live nearby Drove by Google Yelp

Word of Mouth Advertisement/Mailer Other _____

If you heard about us from someone else, who? They may qualify for free daycare! _____

Medical Information:

Allergies? _____

Physical Ailments? _____

Vet/Clinic: _____

Does dog currently take any medication? Y/N

If yes, please let us know more:

Medication	Dosing Schedule	Condition

Will medicine need to be administered during daycare? _____

Social Information:

Is dog socialized with other dogs? _____

Has dog ever bitten another dog or person? _____

Is there any place dog does not like to be touched? _____

Is dog a jumper? _____

Does dog snap, growl, bare teeth, or raise hackles when surprised, scared, or excited? _____

Does dog exhibit signs of separation anxiety? _____

Does your dog know any special commands or tricks? _____

Would you characterize your dog's energy level as high or low? (circle one)

Other Information:

Do you wish to authorize anyone else to pick dog up from daycare? If so, who?

Is dog allowed treats? _____

If you are concerned that your dog will overdo it, we are happy to put him away in a kennel for a nap during the day. Would you like your dog to have a mandatory nap time? _____

IF YOUR DOG WILL BOARD AT THE BARKWAY, PLEASE COMPLETE THE FOLLOWING:

Has dog boarded anywhere before? _____

Do you have any reason to believe that your dog cannot be confined or will have problems adapting to a kennel? If so, please explain. _____

Is your dog known to not eat or otherwise “shut down” during boarding stays? If so, please explain. _____

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

I confirm that I have completed the foregoing Application to the best of my ability. I further agree to provide evidence of current vaccinations (bordetella, rabies, and distemper) as required and to update them as needed in the future. Finally, I confirm that I have read and agree to be bound by the terms of the attached Agreement.

Signature: _____

Name: _____

Date: _____