



Doggie Daycare Registration Form

Contact Information

Parent Name: _____

Address: _____

Email Address: _____

Mobile Phone: _____ Text: Yes No

(circle one)

Current Client

New Client

For Urgent Matters

Your physical location during daycare hours: _____

Other Phone: _____

Name & Phone of another person who we can contact if you cannot be reached:

Daycare Attendance Schedule:

Full Day

Half Day

Drop In

Days:

M

T

W

Th

F

Special Request

Pet Information

Pet Name: _____

Age/Birthday: _____

Breed: (or most resembles) _____

Weight: _____

Spayed/Neutered: Yes No

Date: _____

City of Chicago License # _____

Rabies Vaccination # _____

Temperament

My dog is: (Please circle all that apply)

CAUTIOUS	ANXIOUS	SOCIAL w/OTHER DOGS	SOCIAL w/HUMANS					
UNPREDICTABLE	HYPERACTIVE	NAUGHTY	MISCHIEVOUS	CLEVER	WILD			
LOUD	DOMINANT	SNEAKY	CURIOUS	WHINEY	PROTECTIVE	QUICK	SPOILED	
CLUMSY	BASHFUL	TIMID	LAZY	STRONG	OUTDOORSY	SHAKY	UNIQUE	QUIET
		SILLY	ENERGETIC					

Is your dog generally friendly? Y / N

Has your dog been to daycare before? Y / N

Would you say that he likes other dogs? Y / N

Does he play and interact with other dogs that he just meets? Y / N

How about with those that he knows well? Y / N

Is your dog afraid of anything? Y / N If yes, please explain:

Has your dog ever bitten a person or another animal in the past?

Y / N If yes, please explain: _____

Is your dog protective of his/her food or toys? Y / N

Does your dog consider himself to be a human or a dog? _____

Is he more submissive or more of an Alpha personality? _____

Have you experienced any signs of separation anxiety with your dog? Y / N

Typically, what does your dog do as you are departing the home?

Have you received any complaints for barking or other noise while you are away from home? Y / N

Do you crate your dog while you are away? Y / N

Please explain your approach with training: _____

Have you had professional help with training? Y / N

Was it successful? Y / N

Is your dog potty trained? Y / N

What is your technique? _____

What is your dog's favorite pastime? _____

Favorite game or toy? _____

Are there any specific precautionary measures we should take during your pet's stay to ensure his safety and that of our staff?

Y / N If yes, please explain: _____

May we give your dog treats? Y / N

Any allergies we should be aware of?

Y / N If yes, please explain: _____

Is your dog being treated for any illnesses or viruses currently? Y / N If yes, please explain:

Any previously known skin, teeth or nail problems?

Y / N If yes, please explain: _____

Does your pet have any physical limitations? Y / N If yes, please explain:

Does he/she enjoy a brisk walk or a dilly dally walk? _____

Does he/she prefer the sidewalk or the grass? _____

Does he/she dislike the gravel inside the dog run? _____

Are stairs an issue? Y / N

Will we be picking up and transporting your dog to Daycare? Y / N

If so, please answer the following:

To gain entry to your home, City Pets will: (Please circle) Retain keys Check in with doorman

Please provide detailed instructions for entering your home _____

Do you have a security/alarm system? Y / N If yes, provide instructions:

Building rules for Entering/Exiting: (Please circle) Use Front/Main Entrance Designated Dog Door

Location of collar/leash: _____

Location of towels for rainy/snowy days: _____

Does your dog wear a coat or boots for certain weather? Y / N

If your dog is not initially visible upon my arrival, he/she is probably hiding or sleeping where?

Specific instructions for dropping off at home after Daycare if applicable:

Would you like City Pets to give your pet medicine? Y / N

Name of medication: _____

Location of medication: _____

Dosage and Times per day: _____

What are your main reasons for choosing our Daycare for your dog?

Veterinarian Office: _____

Address: _____

Phone: _____

Emergency Contact: _____ Phone: _____

If another person will be picking up your pet either today or in the future, please provide his/her info:

Name: _____ Phone: _____

Do we have your permission to post a picture of your pet on our social media sites? Y / N

How did you know that City Pets existed? _____

I have received, read and agree with the policies and overall approach that City Pets has described in their Daycare Policies form.

Pet Parent Signature

Date _____

Grooming (if applicable)

Is your dog accustomed to being groomed? Y / N

Briefly describe your grooming style preferences:

*Please refer to our Policies page to learn about our approach with senior pets, puppies/first timers and serious matting conditions. Simply put, we use our expertise to achieve the best and the most out of your pet while he's here. If the final result is unsatisfactory due to certain individual issues your pet may have, we will offer to have you back within a couple of days to "try again". However, we will never push a dog beyond the point of his personal tolerance level.

For certain breeds such as Yorkie, Spaniels, Bichon, etc:

After thorough research, as a rule, our groomers do not routinely pull the hair from the ear canal. The current advice from veterinary dermatologists is that this procedure can do more harm than good by actually creating a greater likelihood of infection by damaging the tender inner ear tissue. Instead, our groomers use blunt tipped scissors to trim the visible hair in and around the ear. This is followed up with a gentle massage to the base of the ear to loosen wax and debris from deep within and a thorough cleaning with products formulated for ear care.

Please indicate your choice by circling the applicable statement below.

Yes, pull his/her hair from ears

No, do not pull hair from ears

City Pets groomers reserve the right to decline the cleaning of a seriously infected ear. It is important to see your vet for a quick, accurate diagnosis and effective treatment, thus lessening the time your pet has to suffer with uncomfortable, often painful symptoms.

As part of the grooming process, our groomers will check the anal glands and determine if they need attention. Please indicate your instructions by circling the applicable statement below.

Yes, express anal glands as needed

No, I prefer that my vet handle this procedure

Daycare Policies

City Pets will provide loving and attentive care for your pet when he/she is in our care.

City Pets requires that your dog(s) be current on his/her vaccinations and will need to have documentation verifying this information in our file prior to his first day of attending daycare.

City Pets will not be held liable for behavior that results in injury to the pet, to another pet, to a human being or to City Pets representatives.

City Pets will conduct an interview with parents and pet to determine if our capabilities and physical set up are a match for your pet's personality and needs. If a dog is not accepted into the program upon his initial attempt, a period of 3 months must pass before a second interview can take place.

If veterinary care is needed in your absence, City Pets will obtain that care. We will first attempt to contact your pet's regular veterinarian, however, if they cannot be reached or the situation calls for immediate attention, we will use a veterinarian/facility of our own choosing. The client will be responsible for all veterinary charges incurred. Please answer the question below by initialing the statement that applies.

A. There is a limit to the monetary amount I would approve of spending for my pet's emergency care occurring during my absence and authorize City Pets to spend up to \$_____. _____ (initials)

B. There is no limit to the dollar amount that City Pets is authorized in approving for the emergency care of my pet during my absence. _____ (initials)

I, _____ have read, understand and agree with City Pets policies as stated above.

Signature _____