

Pooch Play Riverina

Owner & Pet Booking/Enrolment Form

Owner Information

NAME: _____

ADDRESS: _____

HOME PHONE: _____ MOBILE: _____ WORK: _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT'S NAME: _____

HOME PHONE: _____ MOBILE: _____ WORK: _____

Pet Information

NAME: _____ BREED: _____ GENDER: _____

AGE: _____ COLOUR: _____ D.O.B.: _____

DESEX CERTIFICATE: _____ VACCINATION CERTIFICATE: _____

VETERINARY CLINIC: _____

VET'S NAME: _____

TELEPHONE: _____

ADDRESS: _____

Pet Personality Profile

HAS YOUR DOG/S ATTENDED DAY CARE OR SLEEP-OVERS BEFORE? YES / NO

DO YOU HAVE ANY OTHER PETS? _____

IF YES, HOW DO THEY GET ALONG? _____

Pet Health

DOES YOUR DOG HAVE ANY MEDICAL CONDITIONS WE NEED TO KNOW ABOUT?

IS YOUR DOG CURRENTLY ON ANY MEDICATION:

DOES YOUR DOG HAVE ANY ALLERGIES OR FOOD RESTRICTIONS?

Pet Behaviour

HAS YOUR DOG EVER BITTEN A PERSON OR ANOTHER DOG? YES / NO
IF YES, WHAT WERE THE CIRCUMSTANCES?

HAS YOUR DOG EVER GROWLED OR SNAPPED AT ANYONE TAKING FOOD OR TOYS AWAY? YES / NO

DETAILS: _____
HAS YOUR DOG EVER GROWLED OR SNAPPED AT ANOTHER DOG THAT TRIED TO TAKE ITS FOOD OR TOYS AWAY? YES / NO

DETAILS: _____
HAS YOUR DOG EVER SNAPPED AT A PERSON OR ANOTHER PET? YES / NO

DETAILS: _____
IS YOUR DOG OVERLY NERVOUS OR TIMID IN CERTAIN SITUATIONS, E.G. STORMS, THUNDER, VACUUM, ETC? YES / NO

DETAILS: _____
HAS YOUR DOG EVER JUMPED OVER OR CLIMBED OVER A FENCE? YES / NO
IF YES, HOW HIGH? _____

DOES YOUR DOG HAVE ANY OF THESE PROBLEMS:
A. MOUTHING (CHEWING ON HANDS, CLOTHING)? YES / NO
B. HOUSETRAINING? YES / NO
C. EXCESSIVE BARKING? YES / NO
D. CHEWING/DESTRUCTIVENESS? YES / NO
E. SEPARATION ANXIETY? YES / NO

HOW OFTEN DOES YOUR DOG SOCIALISE WITH OTHER DOGS?

ARE YOU ABLE TO REMOVE THINGS FROM YOUR DOG'S MOUTH? YES / NO

IS YOUR DOG FEARFUL OR AGGRESSIVE AROUND OTHER DOGS? YES / NO

HOW DOES YOUR DOG REACT TO PUPPIES? _____

HAS YOUR DOG HAD ANY OBEDIENCE TRAINING? YES / NO

WHAT COMMANDS DOES YOUR DOG UNDERSTAND?

IS THERE ANYTHING ELSE WE SHOULD KNOW ABOUT YOUR DOG?

DO YOU GIVE PERMISSION FOR TREATS TO BE GIVEN TO YOUR DOG? YES / NO
DOES YOUR DOG REQUIRE MEALS DURING THE DAY? YES / NO
(IF YES, PLEASE SUPPLY HIS/HER FOOD IN ORDER TO AVOID UPSET TUMMIES)

General

HOW DID YOU HEAR ABOUT POOCH PLAY RIVERINA?

DO YOU GIVE PERMISSION TO USE PHOTOGRAPHY OF YOUR PET FOR OUR WEBSITE, FLYERS AND BROCHURES? YES / NO

I AGREE THAT THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNED: _____ **DATE:** _____

Reservations

PLEASE BOOK AS FAR IN ADVANCE AS POSSIBLE TO AVOID DISAPPOINTMENT.
SPACE AT POOCH PLAY IS ON A "FIRST COME FIRST SERVED" BASIS.
ONCE A BOOKING HAS BEEN MADE, ANY UNUSED DAYS WILL STILL BE CHARGED.

Contact Details

Linda
Pooch Play Riverina
Wagge Wagga, NSW

0404-048-103 | 02-6925-4493

mlburgshop@bigpond.com

Pooch Play Riverina

Agreement

I _____ HEREBY CERTIFY THAT MY DOG
_____ IS IN GOOD HEALTH AND HAS NOT
BEEN ILL WITH ANY COMMUNICABLE DISEASES IN THE LAST 30 DAYS.

I FURTHER CERTIFY THAT MY DOG HAS NOT HARMED OR SHOWN AGGRESSIVE OR
THREATENING BEHAVIOUR TOWARDS ANY PERSON OR OTHER DOG.

I HAVE READ AND UNDERSTOOD THE FOLLOWING:

1. I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR ANY HARM CAUSED BY MY DOG WHILE MY DOG IS ATTENDING POOCH PLAY RIVERINA.
2. I FURTHER UNDERSTAND AND AGREE THAN IN SENDING MY DOG TO POOCHY PLAY RIVERINA, THE STAFF HAVE RELIED ON MY REPRESENTATION OF MY DOG.
3. I FURTHER UNDERSTAND AND AGREE THAT POOCH PLAY RIVERINA AND THEIR STAFF AND VOLUNTTERS WILL NOT BE LIABLE FOR ANY PROBLEMS WHICH DEVLEOP, PROVIDED REASONABLE CARE AND PRECAUTIONS ARE FOLLOWED, AND I HEREBY RELEASE THEM OF ANY LIABILITY OF ANY KIND WHATSOEVER ARISING FROM MY DOG'S ATTENDANCE AND PARTICIPATION AT POOCH PLAY RIVERINA.
4. I UNDERSTAND AND FURTHER AGREE THAT ANY PROBLEMS WHICH DEVELOP WITH MY DOG WILL BE TREATED AS DEEMED BEST BY THE STAFF AT THEIR SOLE DISCRETION.
5. I UNDERSTAND THAT WHILE IN CARE MY DOG WILL BE IN THE COMPANY OF OTHER DOGS.

I CERTIFY THAT I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF ENROLMENT AT POOCH PLAY RIVERINA

SIGNED: _____ **DATE:** _____

PLEASE COMPLETE, PRINT OUT, SIGN AND BRING ALONG ON YOUR FIRST BOOKING

Linda
Pooch Play Riverina
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