



Downtown Doggie

Indy Downtown Doggie Daycare Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Pet Name: _____ Breed: _____ Age: _____

Gender: (Circle One) Male Female Weight: _____

Age when Spayed or Neutered: _____ Age When Acquired: _____

Where did you obtain your dog: _____

Name and Phone Number of your Vet Clinic: _____

Does your dog live with children: _____

Is your Dog? (Check all that Apply)



Allowed to Run Free at Home



Allowed to Run Free in a Fenced Area

Fence Height: _____



Able to jump your Fence



Able to walk on a leash without struggle

Does your dog prefer to play with: (circle one) Male Dogs Female Dogs No Preference

Is your dog possessive of any toys, food, objects, or people? If yes, please explain: _____

Has your dog ever shared food and/or objects with other dogs? If yes, please describe. _____

Has your dog ever growled or snapped at anyone taking food or toys away or at any person in general? If yes, please explain. _____

Has your dog ever bitten anyone or another dog? Please explain. _____

Where does your dog sleep at night? _____

How does your dog react when strangers approach the home or yard or out in public? _____

Is your dog afraid of any other dogs? _____

Does your dog play off leash with other dogs? Describe your dog's socialization level. _____

How does your dog react to puppies? _____

What is your dog's training history? (Check All that Apply)



No Training



Trained Yourself



Puppy Kindergarten



Group Basic Class



Group Advanced Class



Private Training Session(s)

Obedience Titles and/or Awards: _____

Does your dog have any problems in these areas: (Circle All the Apply and Describe)

Sensitive about any parts of his/her body? Tail, Paws, Hindquarters, Nails Clipped, Being Brushed, Hip Problems? _____

Please inform of any serious issues you would like to address. _____

What is the main reason you have chosen Downtown Doggie Daycare? _____

How did you hear about us? _____

I, _____ (owner name), hereby certify that my dog(s) are in good health and have not been ill with any communicable diseases in the last 30 days. I further certify that my dog(s) have not harmed or show aggressive behavior toward any person or dog.

Signature of Owner: _____