



Downtown Doggie

## Welcome to the Indy Downtown Doggie Family

Please complete the following document which is required for daycare and boarding services.

You will need **Adobe Reader FREE software** to complete the form. You may download Adobe Reader here: <https://get.adobe.com/reader/>

A copy of your dog's vaccination record is also required.

Once complete, you may upload the application and vaccination record files to your Indy DTD PetExec account or email them to [contact@indydtd.com](mailto:contact@indydtd.com).

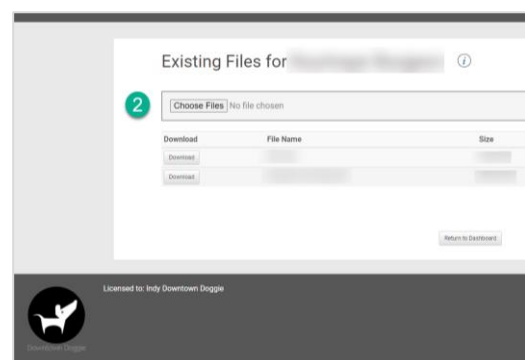
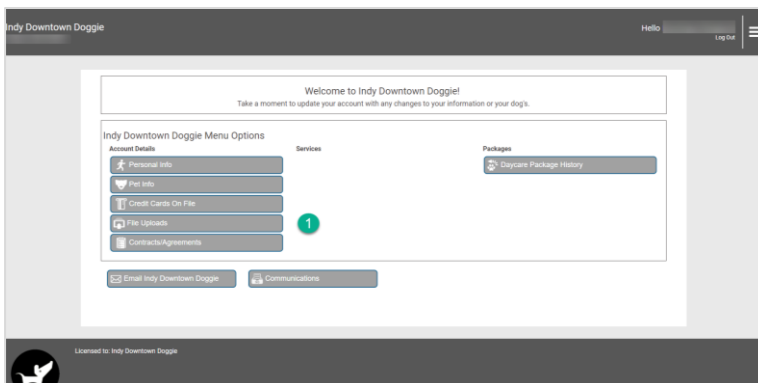
### How to Upload the Application and Vaccination Record to your Indy DTD PetExec Account

Log-in to your PetExec Account at <https://secure.petexec.net/login.php>

- 1) From your "Dashboard" Select "File Uploads"
- 2) Click on "Choose Files". Locate the completed application and boarding file to upload.

*Repeat the same process to upload your dog's vaccination records.*

If you have any questions, contact us at [contact@indydtd.com](mailto:contact@indydtd.com)



### Indy Downtown Doggie

925 E. VERMONT Street, Indianapolis, IN 46202  
(317) 979 2665 | [contact@indydtd.com](mailto:contact@indydtd.com) | [www.indydtd.com](http://www.indydtd.com)



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## Indy Downtown Doggie Daycare & Boarding Application

Owner's Name:

Street Address:

City:

State (abbreviation):

Zip Code:

Primary Phone #:

Secondary Phone #:

Email Address:

Emergency Contact Name:

Emergency Contact #:

Dog Name:

Dog Breed:

Age:

Veterinary Clinic Name:

Veterinary Clinic Phone #:

Weight:

Sex:    Male    Female    Spayed or Neutered:    Yes    No    Age When:

Where did you obtain your dog?

Age When Obtained:

Does your dog have any allergies?    Yes    No

If yes, please explain:

Brand of dog food used:

How much?

Does your dog stay in a crate?    Yes    No

Where does your dog sleep at night?

Are there other dogs in the household?    Yes    No

If yes, list name, breed and age of each dog:

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

Would you be interested in taking an obedience class?    Yes    No

### Indy Downtown Doggie

925 E. Vermont Street, Indianapolis, IN 46202  
(317) 979 2665 | [contact@indyDTD.com](mailto:contact@indyDTD.com) | [www.indydttd.com](http://www.indydttd.com)

Is Your Dog (check all that apply)

Allowed to run free at home.

Allowed to run free in a fenced area.

Able to jump your fence.

Fence Height:

Able to walk on a leash without struggle.

Is your dog possessive of any toys, food, objects, or people?    Yes    No    If yes, please explain:

Has your dog ever shared food and/or objects with other dogs?    Yes    No    If yes, please explain:

Has your dog ever growled or snapped at anyone taking food or toys away or at any person in general?  
Yes    No    If yes, please explain:

Has your dog ever bitten anyone or another dog?    Yes    No    If yes, please explain:

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

Is your dog afraid of any other dog?    Yes    No    If yes, please explain:

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 Sessions

List Any Obedience Titles and/or Awards:

Does your dog have any problems with, and/or sensitivity about, any parts of their body? (check all that apply and describe)

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 Indy Downtown Doggie?

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: \_\_\_\_\_