

# K9 Fun Zone

Dog Daycare

## OWNER INFORMATION

Name(s):			
Address:			
Email:			
Home Phone:		Cell Phone:	Work Phone:

## EMERGENCY CONTACT *(different than yourself)*

Name:			
Home Phone:		Cell Phone:	Work Phone:

## PET INFORMATION

Name:		Breed:		Gender:	
Spayed/Neutered:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	(daycare intact age limit 1 year)		
Date of Birth:		Weight:			
Vaccination Date:	attach copy of record				

*Dogs attending K9 Fun Zone daycare are required to have the following vaccinations: Distemper(A), Hepatitis(B), Parvo(B), Para Influenza (A), Rabies(R) and Bordetella. Giardia is also recommended. All dogs must be treated monthly with a flea prevention program such as Bravecto™, Advantage™, Revolution™, etc.*

## VETERINARIAN

Name/Clinic:			
Address:			
Phone:			
Pet Insurance:	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, Company & Policy No.:	

Attach photo of your dog  
\*preferably with yourself included  
for pick-up safety

## FOR K9 FUN ZONE USE ONLY

Enrolment Form:		Vaccinations:		Assessment:	
Computer Entry:		Folder Made:		First Day:	
Notes:					

## K9 Fun Zone

### Owner Agreement

I \_\_\_\_\_, hereby certify that my dog(s): \_\_\_\_\_  
is/are in good health and have not been ill with any communicable condition in the last 30 days. I further  
certify that my dog(s) has/have not harmed or shown aggressive or threatening behaviour towards any  
person or any other dog. Initials: \_\_\_\_\_

I have read and understand the following:

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are  
attending K9 Fun Zone Daycare. If you have pet insurance coverage and your dog gets injured, you  
are responsible for making the claim through your insurance company. Initials: \_\_\_\_\_
2. I further understand and agree that in admitting my dog(s) to the Daycare, K9 Fun Zone, staff have  
relied on my representation that my dog(s) is/are in good health and have not harmed nor shown  
aggressive or threatening behavior towards any person or any other dog. Initials: \_\_\_\_\_
3. I further understand and agree that K9 Fun Zone, their staff and volunteers will not be liable for any  
injuries/illness. They will provide reasonable care and ensure precautions are followed. I hereby  
release them of all liability of any kind whatsoever arising from my dog's attendance and participation  
at Daycare. Initials: \_\_\_\_\_
4. I further understand and agree that any injury/illness which develops with my dog(s) will be treated as  
deemed best by K9 Fun Zone staff and volunteers at their sole discretion. This could include seeking  
necessary medical attention at a local veterinarian clinic and that I assume full financial responsibility  
for any and all expenses involved. Initials: \_\_\_\_\_
5. In order to remain in our active data base, daycare dogs must attend at least twice per month.  
Otherwise, they will be listed as inactive and a new Meet & Greet will need to be scheduled at a fee  
of \$25. Cancellations with less than 24 hours notice will be charged a full day fee. Initials: \_\_\_\_\_

I certify that I have read and understand the policies of the Daycare as set forth on the preceding pages  
and that I have read and understand the conditions and statements of this agreement including the  
following: Initials: \_\_\_\_\_

#### **FEES:**

Fees are \$25/day for one dog and \$45/day for two dogs. *\*Subject to change at any time*

#### **DAYS AND HOURS:**

Monday through Friday 7:00 am – 6:00 pm. Staff goes Off Duty at 6:00 pm  
Late Pick-Up Fee: \$10 for each half-hour or part thereof

#### **SWIMMING:**

June – September, swimming days *may* be included. This depends upon the pool and staff schedules.

Is your dog permitted to participate?

Yes ☐ No ☐

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Signature of Owner

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Date

## K9 Fun Zone

### Pet Profile

Owner's Name: \_\_\_\_\_ Dog's Name: \_\_\_\_\_

Breed: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender: M ☐ F ☐ Spayed/Neutered: Yes ☐ No ☐

Removed from daycare previously? Yes ☐ No ☐

Bite History? Yes ☐ No ☐

Good with children? Yes ☐ No ☐

Bark Excessively? Yes ☐ No ☐

Shares toys? Yes ☐ No ☐

Comes when called? Yes ☐ No ☐

Good with other dogs? Yes ☐ No ☐

Nervous with strangers? Yes ☐ No ☐

Fearful of loud noises? Yes ☐ No ☐

Digs? Yes ☐ No ☐

Housetrained? Yes ☐ No ☐

Can your dog have treats? Yes ☐ No ☐

Have photo taken for Facebook / Instagram? Yes ☐ No ☐

Allergies? Yes ☐ No ☐

If yes, please list:

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Medical Conditions? Yes ☐ No ☐

If yes, please describe any limitations:

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Will your dog require to be fed a meal while with us?

Yes ☐ No ☐

If yes, please indicate the usual time, amount and routine. Ensure you send enough food with your dog. Please mark dog's name on bag / container.

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What commands does your dog understand?

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Additional information you feel we should know:

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