

K9 Fun Zone

Dog Daycare

OWNER INFORMATION			
Name(s):			
Address:			
Email:			
Home Phone:		Cell Phone:	Work Phone:
EMERGENCY CONTACT			
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 6 to 8 months)	
Date of Birth:	Click here to enter a date.	Weight:	
Vaccination Date:	Click here to enter a date.	<i>attach copy of record</i>	
<i>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.</i>			
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:	Swimming Nails Massage		

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) 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:

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:

FEES:

Fees are \$25/day for one dog and \$45/day for two dogs.

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

RESERVATIONS:

Required. Cancellations with less than 24 hour notice will be charged a full day fee.

SWIMMING:

May – September, swimming days will be included. Is your dog permitted to participate? Yes No

MASSAGE, COLD LASER TREATMENTS, NAIL TRIMS:

A Registered Vet Tech, Certified Canine Massage and Certified Canine Rehab Professional will be
available for massages, cold laser treatments and nail trims. Are you interested in scheduling
appointment times during your playdates at separate fee? Yes No

Signature of Owner

Date

K9 Fun Zone

Pet Profile

Owner's Name: _____ Dog's Name: _____

Breed: _____ DOB: [Click here to enter a date.](#)

Gender: M F Spayed/Neutered: Yes No

Bite History? Yes No Good with other dogs? Yes No

Good with children? Yes No Nervous with strangers? Yes No

Bark Excessively? Yes No Fearful of loud noises? Yes No

Shares toys? Yes No Digs? Yes No

Comes when called? 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:

Medical Conditions? Yes No If yes, please describe any limitations:

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.

What commands does your dog understand?

Additional information you feel we should know:

