

## **Enrollment Application**

Welcome to Doggie Central! We are very happy that you have chosen to entrust us with your best friend. Please take a moment to answer a few questions about yourself and your wonderful canine. This information will help us to maintain a fun, healthy and safe environment for all our guests and staff.

#### **Please Note:**

- ✓ We require up-to-date written proof of vaccinations from your vet:
  - Bordatella (every 6 months)
  - Distemper
  - Rabies
- ✓ An active flea & tick preventative program is required monthly
- ✓ All dogs must wear a buckle or snap collar with a name tag
- ✓ We highly recommend that your dog is micro-chipped

### A friendly reminder:

In a cage-free environment, your pet may sometimes get scratched or bumped when playing with other dogs. Just like kids, your dog may incur minor injuries or become dirty while playing and wrestling. Expect to notice these types of things on occasion. Rest assured that our knowledgeable and trained staff will always be watching out for your pet. Anything that could be cause for concern will be brought to your attention immediately.



CLIENT INFORMATION
Dennis Berent #4
Doggie Parent #1
Home Adress
City State Zip           Home Phone ( ) Work Phone ( )
Cell Phone ( ) Fax # ( )
Cell Phone ( ) Fax # ( )         E-Mail Address CA Driver's License #
Credit Card # (required)
How did you hear about Doggie Central?
Emergency contact, in the event you are unreachable:
NamePhone ( )
Name Phone ( )
DOGGIE INFORMATION
#1 DOG NAME Breed
#1 DOG NAME Breed
Neutered/Spayed: Yes□ No □
Dog License #
Is your dog Micro-chipped? Yes□ No □ If so, from what company/brand?
Brand of Food How much?
Frequency: 1x day☐ (AM☐ or PM☐)   2x day☐
If your dog isn't eating is it ok to add the following to their meal?
Wet food: Yes ☐ No ☐   Cheese: Yes ☐ No ☐
Medical Problems
Allergies
Medications
Flea Product (required)
Personality/Disposition
Behavior Problems
Aggression towards People or Dogs
Jump fences/escape enclosures? Explain:
Has your dog ever attended daycare or been boarded before? Yes ☐ No ☐ What was the experience like?
Anything else we should know about your dog/s? Please explain here:

# CLIENT INFORMATION Doggie Parent #2 Home Adress E-Mail Address\_\_\_\_\_ CA Driver's License # \_\_\_\_ Credit Card # (required) \_\_\_\_\_\_ VISA □/ MC □/ AMX □ Exp. / How did you hear about Doggie Central? Emergency contact, in the event you are unreachable: Name \_\_\_\_\_\_Phone ( ) \_\_\_\_\_\_ Name \_\_\_\_\_Phone ( ) DOGGIE INFORMATION #2 DOG NAME \_\_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Birthday: \_\_/\_ / \_\_ Age \_\_\_\_ Sex \_\_\_\_ Weight \_\_\_\_\_ Neutered/Spayed: Yes□ No □ Dog License # Vaccination Dates: DHLPP: \_\_/\_\_ | Rabies: \_\_\_/\_\_ | Bordatella: \_\_/\_\_/ Is your dog Micro-chipped? Yes□ No □ If so, from what company/brand?\_\_\_\_\_ Brand of Food \_\_\_\_\_ How much? \_\_\_\_ Frequency: 1x day☐ (AM☐ or PM☐) | 2x day☐ If your dog isn't eating is it ok to add the following to their meal? Wet food: Yes ☐ No ☐ | Cheese: Yes ☐ No ☐ Medical Problems \_\_\_\_\_ Allergies Medications \_\_\_\_\_ Flea Product (required) Personality/Disposition \_\_\_\_\_ Behavior Problems Aggression towards People or Dogs Jump fences/escape enclosures? Explain: Has your dog ever attended daycare or been boarded before? Yes ☐ No ☐ What was the experience like? Anything else we should know about your dog/s? Please explain here:

VETERINARY INFORMATION		
VeterinarianPhone ( )  Veterinarian Office  Vet Address  Pet Insurance		
Please describe in detail any medical issues, or previous ailments we should know about:		
Emergency Medical Release:		
☐ I prefer my dog to be taken to our Veterinarian only☐ It is ok to take my dog to the nearest animal hospital or emergency clinic		

In the event of an emergency or injury, Doggie Central will contact you and/or your emergency contact immediately. If we are unable to reach you or your emergency contact, we will transport your dog to the nearest animal hospital/clinic for a \$20 transportation fee each way. If the situation does not require immediate attention, you will be contacted and we will follow your instructions.

### **RULES & REGULATIONS**

Please initial and sign that you have read & agree to the rules & regulations.

	ke chains, harnesses, spiked collars, or prong collars are allowed uckle or snap type collar with proper identification (name tag) in
<ul> <li>will be charged.</li> <li>We accept credit cards (MasterCard, Vand cash.</li> <li>A credit card number is required at the</li> </ul>	If you leave the facility without paying, your credit card on file /isa, or American Express), cashier's checks, money orders, time of drop off in case of any additional charges. Doggie dog left for an extended period of time without payment in an ion.
to have fleas at any time, he/she will be given a vaccination records are not provided to the front	updated on all vaccinations and flea treatments. If a dog is found bath and flea treatment at the owner's expense. If updated office, and the veterinarian on file does not have current er the vaccinations or have vaccinations administered at the
<b>4.</b> DROP-OFF/PICK-UP HOURS Although Doggie Central is a 24-hour care facilit Saturday, 6:30 a.m. to 9:00 p.m., and Sunday, 7	y, our regular drop-off and pick-up hours are Monday through :30 a.m. to 9:00 p.m.
<b>5. AFTER-HOURS FEE</b> If there are early or late pickups or drop offs, the bill.	re is a mandatory after-hours fee of \$25 that will be added to your
dog attendants are constantly monitoring playtim it is possible that a dog may incur scratches or n	r dogs to get dirty and tired after playing with the other dogs. Our ne to watch for any aggressive or unordinary behavior. Sometimes ip marks. These instances will be communicated to the owner xcited or too playful, we will put the dog in a time-out to let them
live camera feeds from our website. Doggie Cen	n 10am until 4pm every day. Owners are welcome to access the tral also has a Facebook and Twitter account, and there are times at them on either our website, Facebook or Twitter pages.
8 MEDICATIONS If your dog requires medication or vitamins durin the frequency and time administered. There is a	g their stay, please supply us with specific directions concerning \$2.50 charge per administration
9 FLEA BATHS & NAILS For the safety and well being of all our dogs, if D trim, we will provide this service immediately and	loggie Central determines that your dog requires a flea bath or naild add the charge to your account.
<b>10. MUZZLES</b> Excessive barkers may be a hazard to the rest of muzzle excessive barkers for a short period of ti	of the group. They keep the group agitated and on edge. We may me so they can calm down and relax.
Owner's Signature	Date
Owner's Signature	Date

### AGREEMENT

# All statements must be initialed and the Agreement signed.

1 I understand that even though Doggie Central requires to Cough with the Bordetella vaccine every 6 months, the vaccine strain of the virus. Being in a group environment highly increas regardless of having the vaccine. I understand this risk and known responsibility for veterinary expenses.	does not protect my dog from every new es the risk of contracting Kennel Cough,
2 I further understand and agree that in admitting my dog has relied on my representation that my dog(s) is/are in good he aggressive or threatening behavior towards any person or any Doggie Central in writing all problems or characteristics of my care of my dog(s) while at Doggie Central including, but in no w this Form.	ealth and has/have not harmed or shown other dog and that I have fully disclosed to dog(s) which may affect the handling and
3 I further understand that I am solely responsible for and all liability incurred as a result of any injury and/or harm to a pe while visiting Doggie Central.	
4 I further understand and agree that Doggie Central and to for any problems that develop provided reasonable care and proto release them and hold them harmless from any liability of any visitation and participation at Doggie Central.	ecautions are followed, and I hereby agree
5 I further understand and agree that any illness that my control will be treated as deemed best by staff and volunteers of discretion, and that I assume full financial responsibility for any that extra activity from extra play and/or swimming may cause in need extra rest for a day or two until becoming accustomed to recause a condition known as Swimmer or Lab Tail. This can cau and usually requires extra rest for a day or two. It is caused by I choose to take my pet to the vet for this condition and the diagreent of the vet for the v	of Doggie Central and in their sole of and all expenses involved. I understand my pet to become extra tired and may new activities. New or extra swimming may se a temporary paralysis of the back legs overuse and spraining of muscles. Should gnosis and treatment is Swimmer Tail and
6 I further understand and agree that my dog may be injur I give my full authorization to use my credit card for these purpo Central.	
7 I AGREE THAT ANY AND ALL DISPUTES WHICH ARISE OF MATTER OF THIS AGREEMENT AND/OR IN ANY WAY RELATE TO SHALL BE RESOLVED BY BINDING ARBITRATION CONDUCTED OF THE AMERICAN ARBITRATION ASSOCIATION ("AAA") IN LOTAL INTERPOLITION OF THE AMERICAN ARBITRATION ASSOCIATION ("AAA") IN LOTAL INTERPOLITION AND FURTHER WAS DISTRESS, LOSS OF COMPANIONSHIP AND/OR PUNITIVE DAM MAXIMUM AMOUNT OF ANY CLAIM AGAINST DOGGIE CENTRAPPINCIPALS WHICH IN ANY WAY RELATES TO MY DOG(S) AND LESSER OF TWO THOUSAND DOLLARS (\$2,000) OR THE COST SAME BREED, COMPARABLE PEDIGREE AND SEX OF THE DOSUCH CLAIM.	TO MY DOG(S) AND DOGGIE CENTRAL D BY AND PURSUANT TO THE RULES DS ANGELES, CA. IN THIS REGARD, TRIAL BY JURY, TO APPEAL OR AIVE ANY RIGHT TO SEEK EMOTIONAL IAGES. I FURTHER AGREE THAT THE AL AND/OR ITS EMPLOYEES AND D DOGGIE CENTRAL SHALL BE THE ITO PURCHASE A PUPPY OF THE
8 I certify that the information provided herein is true and understand the payment terms, rules and agreement. I agree to terms, conditions and agreements.	
Owner's Signature	Date
Owner's Signature	Date