

Date:

Your Details	
Name:	
Address:	
Primary Contact no.	Secondary contact no.
Email:	
How would you prefer to be contacted:	

Booking Dates & Times
Ongoing Basis. Please select the days you would like to book your dog/s in for Day Care:
<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday or <input type="checkbox"/> days change each week
Start Date:
One Off. I would like to book my dog/s in to day care on the following dates (inclusive):

Vets Details	
Vet clinic:	Preferred Vet:
Address:	
Phone:	Which name will your pet be under?

How did you hear about us?
<input type="checkbox"/> Veterinarian <input type="checkbox"/> Client <input type="checkbox"/> Internet <input type="checkbox"/> Advertisement <input type="checkbox"/> Rescue/ Shelter <input type="checkbox"/> Pet Store <input type="checkbox"/> Other
Name of referring individual, organization or publication:

Access Information
e.g. key provided, keys under front mat, side gate etc. :

Dog's Details

1 st Dog	
Name:	Age:
Breed:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Desexed: <input type="checkbox"/> yes <input type="checkbox"/> No	Colour/ markings:
Vaccination Certificate received: <input type="checkbox"/> *Your dog must be up to date with vaccinations to walk with us	
Health issues/ allergies:	Permitted off lead:
Does your dog come when called: <input type="checkbox"/> Every Time <input type="checkbox"/> Sometimes <input type="checkbox"/> Never/ needs to be caught	
Is your dog allowed to swim?	
Please describe your dog's behavior with other dogs/ people?	
Has your dog shown any signs of aggression or had an incident with another dog or human?	
Are there any situations your dog shows fear or is nervous?	
Does your dog show any signs of guarding around certain objects i.e. ball, toy etc.?	
Are there any special instructions or anything further we should know about your dog?	

2 nd Dog	
Name:	Age:
Breed:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Desexed: <input type="checkbox"/> yes <input type="checkbox"/> No	Colour/ markings:
Vaccination Certificate received: <input type="checkbox"/>	*Your dog must be up to date with vaccinations to walk with us
Health issues/ allergies:	Permitted off lead:
Does your dog come when called: <input type="checkbox"/> Every Time <input type="checkbox"/> Sometimes <input type="checkbox"/> Never/ needs to be caught	
Is your dog allowed to swim?	
Please describe your dog's behavior with other dogs/ people?	
Has your dog shown any signs of aggression or had an incident with another dog or human?	
Are there any situations your dog shows fear or is nervous?	
Does your dog show any signs of guarding around certain objects i.e. ball, toy etc.?	
Are there any special instructions or anything further we should know about your dog?	

Anything else we need to know?

Office Use Only

Payment	
Method: Cash or DD	Basis: Weekly, fortnightly or monthly

Client Information

- Please note: All photo's taken of dogs during their walk are posted on our Facebook page at the end of each week.
- We have a 24 hour cancellation policy (please let us know you would like to cancel by 9am the day prior to your booking , otherwise the full fee will be forfeited).
- We still walk in wet weather, and towel dry your dog/s before their return.

Keys collected: Yes No

Office Use only

Notes

Client No.