



Application

Please check the service you are applying for:

Daycare

Boarding

Date of first visit: _____

Owner's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Business Phone: _____

Cell phone: _____ Emergency phone: _____

E-mail address: _____

Pet Information

Name: _____ Breed: _____

Age _____ Birth Date _____

Weight: _____ Color: _____

How did you hear about Off The Leash (vet, friend, other)? _____

Check one of the following:

Neutered Male

Spayed Female

unaltered, under 7 months old

Method of flea control: _____

Where did you acquire your dog? _____

How long has your dog lived with you? _____

What food do you feed your dog? _____

Does your dog have an I.D. tag? Yes No

Is your dog housebroken? Yes No

Has your dog ever had kennel cough? Yes No

Does your dog cough, sneeze, wheeze, or exhibit any asthmatic symptoms? Yes No

Has your dog ever been boarded or attended doggie daycare? Yes No

Has your dog ever bitten a person or another dog? Yes No

Has your dog ever exhibited aggressive behavior towards people or other dogs? Yes No

If yes, please explain: _____

Has your dog ever been bitten or attacked by another dog, or been abused? Yes No

If yes, please explain: _____

Is your dog a jumper, climber, escape artist? Yes No
If yes, please explain:

Medical Emergency Information

Veterinarian's Name/Clinic: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Vaccinations

Please list the most recent date of the following vaccinations:

Rabies _____ DHLPP _____

Bordetella _____

Please describe any medical or physical problems (include seizures, separation anxiety, etc)

Emergency Contact Name and Phone Number (Please list someone other than yourself.)

Off The Leash will release your dog to the following contacts (with proper ID):

1. _____
2. _____
3. _____
4. _____

By checking here, you may verbally (by telephone) or in writing (by facsimile or otherwise) request that Off The Leash release your dog to someone other than the person(s) listed above, and you release Off The Leash of and from any and all responsibility for releasing your dog to any person Off The Leash believes to be authorized by yourself.

Please list any special instructions here:
