



SEA PAWS

DOG RESORT

Where pups play while you're away!

251-200-1808

seapawsdogresort@yahoo.com

www.seapawsdogresort.com

Hours: Mon - Sat 7am-6pm

Sun 7am-9am or 2pm-5pm

Closed @ Lunch 12-1:30pm

APPLICATION

Please complete a profile for each dog to be enrolled at Sea Paws. Complete responses assist us in the interview process. There are no right or wrong answers as all dogs are unique. Please type or print clearly.

Please note that we require proof that the following vaccinations are current: Rabies, Parvo, and DHLP. We require proof of a Bordetella (kennel cough) vaccine or nasal spray.

Owner

Name	Date
Address	City, State, Zip
Home Phone	Work Phone
Cell Phone	Email

Emergency Contact

Name	Phone
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Vet Contact

Name	Phone
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Dog

Name	Breed
Color	Birthdate
Weight	Spayed or Neutered (Mandatory to come play with us)

Health

Does your dog have any physical disabilities? If yes, what restrictions need to be placed on your dog's activities or movements? <input type="checkbox"/> No jumping <input type="checkbox"/> No running <input type="checkbox"/> No Hard Play <input type="checkbox"/> No contact with other dogs	Please explain advisability and cause: Other (please explain)
What is the level of exercise that best describes your dogs routine: <input type="checkbox"/> Couch Potato <input type="checkbox"/> Mild Exerciser <input type="checkbox"/> Moderate Exerciser <input type="checkbox"/> Athlete	

Behavior (Relations with people and other animals)

Check the level of dog socialization that best describes your dog's routine: <input type="checkbox"/> None - No knowledge of other dog interaction <input type="checkbox"/> Minimal - On lead encounters only <input type="checkbox"/> Moderate - Some off-lead playtime on occasion with visitor's/neighbor's/friend's dog(s) <input type="checkbox"/> Extensive - Regular visits to dog social events, off lead dog parks, dog daycare, etcetera
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Other comments or information about your dog that you feel might be helpful.
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How did you first hear about Sea Paws Dog Resort LLC. <input type="checkbox"/> Drive by <input type="checkbox"/> Website <input type="checkbox"/> Direct Mail <input type="checkbox"/> Flyer <input type="checkbox"/> Event <input type="checkbox"/> Referral <input type="checkbox"/> Other
Please let us know who referred you: