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THE COASTAL DOG, INC. *Application & Client Information*

144 Middle Road, PO Box 141, Edgecomb, Maine 04556
 email: info@thecoastaldog.net fax: 800-779-0658 phone: 207-882-6700

At The Coastal Dog, our top priority is the happiness and safety of the dogs in our care. Because of this, we ask that you fill out the following application form as honestly and completely as possible.

Guardian Information:

Primary Guardian Name: _____ Date: _____
 Additional Guardian Name: _____
 Maine Address: _____
 City : _____ Zip : _____
 Other Address: _____
 City : _____ State : _____ Zip : _____
 Phone numbers: _____
 Emails: _____
 Emergency Contact Name (In case your dog needs to be picked up due to aggression, excessive barking at night, illness or other emergency): _____ Phone : _____
 Relationship of Emergency Contact (such as sister, friend) : _____

Dog Information

Name: _____ Breed: _____
 Date of Birth: _____ Sex: _____ Approximate Weight: _____
 Spayed / Neutered? Circle one: Yes or No Colors/Markings : _____
 How old was your dog when you first acquired him/her? _____
 How long have you had your dog? _____
 Where did you get your dog? _____
 Has your dog attended daycare before? _____ If so, where? _____
 Briefly describe your dog's training history: (e.g., trained myself, beginner puppy classes, service dog training, etc.)

 What commands does your dog know? _____
 Is your dog crate-trained? _____ Where does your dog sleep at home (his/her bed, the people bed, crate, etc...)? _____
 Does your dog exhibit any of the following behaviors? Please describe any "yes" answers below.
 Excessive Barking yes no Climbing fences yes no Guarding food/toys yes no
 Digging yes no Housetraining/Marking Issues yes no Separation Anxiety yes no

Continued...

Please check the words that best describe your dog (check all that apply):

Calm Playful Excitable Loud Shy Dominant Aggressive

If you respond "yes" to any of the following, please describe below.

Does your dog have any fears or phobias? yes no

Has your dog ever attacked or bitten another dog or person? yes no

Are there any people your dog automatically dislikes or fears? yes no

Are there any dogs your dog automatically dislikes or fears? yes no

What is your dog's current daily level of activity? _____

Is your dog taking year round heartworm prevention? yes no

Does your dog have allergies? yes no If yes, describe below.

Does your dog have (now or in the past) any medical conditions? yes no If yes, describe below.

Is your dog taking any medications? yes no If yes, describe below.

Does your dog have any unusual sensitive areas on his/her body? yes no If yes, describe below.

What flea and tick preventative do you use on your dog ("herbal" or "holistic" remedies are not accepted)? _____

Are you interested in daycare, boarding or both? Are there specific dates you are looking for? _____

Along with this form, The Coastal Dog requires documentation that your dog(s) are up-to-date on their Rabies, Distemper/Parvovirus (DHPP) and Bordetella (we request every 6 months) vaccinations. You may attach a copy to this form and mail or email it to us, or have your veterinarian fax them to The Coastal Dog at 800-779-0658. The Bordetella vaccine must have been given at least 7 days prior to any meet and greet or boarding/daycare stay with us. Having the Bordetella vaccine does not mean your dog is 100% protected against kennel cough. For more information, ask your veterinarian. Dogs over the age of 6 months must be spayed or neutered, extra-large breeds by 8 months - **no exceptions**.

Veterinarian/Practice: _____ Phone: _____

Location: _____