

DOG DAYCARE REGISTRATION FORM

Welcome to Poochie Play Centre, come and let your pooch play & make some new friends!
(Please use **BLOCK CAPITALS** and tick where necessary)

Owner Information

Full name _____ Telephone _____
 Address _____ Email _____
 _____ Emergency Contact _____
 _____ Emergency Number _____
 Vet Name _____

Dog Information

Name _____ Sex Male Female
 Date of Birth _____ / _____ / _____ Spayed/Neutered Yes No
 Colour _____ Insured Yes No
 Breed _____ Insurance Company _____
 Rescue Dog Yes No

Does your dog have any on-going conditions:

- Lumps/Scars Yes No . . . (if yes, please detail _____)
- Sensitive Areas Yes No . . . (if yes, please detail _____)
- Allergies Yes No . . . (if yes, please detail _____)
- Dysplasia Yes No
- Medical Condition Yes No . . . (if yes, please specify _____)
- Medication Yes No . . . (if yes, please detail _____)
- Require Feeding (day) Yes No . . . (If yes, please bring in a clearly marked container)

Additional Information: (feeding requirements,
behaviour, type of injury, emergency, etc)

Vaccination, Flea & Worming Details:

(Copy Required) **POOCHIE PLAY CENTRE USE ONLY**

Type	Date Administered	Expired
KC		
DHP		
Lepto2		

Legal Agreement *(Please read and sign below)*

As a day care for dogs we ask you as the client to adhere to the following conditions:

1. I understand that to begin the process, I will need to arrange an initial assessment where both the dog and owner attend. This will last approx. 30 mins and is to ensure your dog is happy and is happy to socialise with other dogs.
2. I understand that my obligations under the Control of dogs act 1992 states that my dog(s) must wear a collar and identity tag in a public place. (From 2016 all dogs must be micro chipped by law).
3. I understand that my dog must have up to date vaccines and that vaccination certificates must be provided and copied. I also understand that my dog must have regular flea and worm treatments.
4. I understand that my dog must be over the age of 12 weeks to enrol, and if male, castrated by 9 months of age
5. I understand that my dog will be in open play and off the lead when in the facility.
6. I understand that during normal dog play and agility that dogs may sustain slight injuries. Whilst play will be monitored to avoid injury, Poochie Play Centre cannot be held responsibility for any injury suffered whilst at the centre or at any other time.
7. I understand that although my dog is vaccinated against kennel cough there is a slight risk that it could still be contracted and therefore will not hold Poochie Play Centre responsible if this happens and will comply with the isolation policy.
8. I agree to notify Poochie Play Centre of any contagious disease that my dog(s) is exposed to or is infected by.
9. I agree to notify Poochie Play Centre of any behavioural changes in my dog(s).
10. To ensure my dog's well being I understand it may be penned to allow for rest periods. in some cases to ensure your dogs safety they may be muzzled if they continuously bark or snap at others.
11. I allow and consent to my dog being photographed and videoed and footage to being used in media or advertising by Poochie Play Centre.
12. I accept that if I am late to pick up my dog from day care, I will be charged according at £5 for every 15 mins after 6pm.
13. I agree to pay all costs for my dog that may arise as a result of injury or illness, including veterinarian care and costs. I shall pay such costs as a reimbursement immediately upon pick-up of my dog or when the services are been completed.
14. If my dog becomes aggressive towards others I understand Poochie Play Centre have the right to cancel any services offered.
15. I agree that Poochie Play Centre cannot be held responsible for any lost or damaged items.

I allow my dog to be lead walked outside of the centre Yes No

In the event of an emergency do we have your permission to take your dog to our approved vet Yes No

I confirm that I fully understand the above terms and conditions of Poochie Play Centre.

Please tick box

Signed _____

Print Name _____ Date _____ / _____ / _____