

Enrollment Application



Owner Information

Primary Owner Name _____

Address _____ City _____ Zip Code _____

Home Phone (____) _____ Work (____) _____ Cell (____) _____

Email address _____

Secondary Owner Name _____

Address _____ City _____ Zip Code _____

Home Phone (____) _____ Work (____) _____ Cell (____) _____

Email address _____

Emergency Contact (if other than owner)

Name(s) _____ Relationship _____

Home Phone (____) _____ Work (____) _____ Cell (____) _____

Authorized to pick-up and drop-off your dogs:

Name(s) _____ Relationship _____ Phone _____

Name(s) _____ Relationship _____ Phone _____

Help Us Serve You Better

How did you hear about us? Drive-by Website Yellow Pgs Direct Mail Dog Park

Referral from: _____ (referrals receive a free day of daycare) Other: _____

What is the primary reason for enrolling your dog in daycare?

Separation Anxiety / Destroys Home Work long hours Loves to play with other dogs

Other: _____

Veterinary Information

Veterinarian _____ Contact _____

Address _____ Phone (____) _____

****Documentation from veterinarian of current vaccinations (Rabies, DHLPPC, Bordatella) is required****

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Pet Information (Please complete one page for each pet.)

Name _____ Age/Birth Date _____ Female Male
 Breed _____ Color _____ Weight _____ Spayed Neutered

Health History

Flea/Tick Prevention Type/Brand _____ Date last applied ____/____/____
 Health conditions/Allergies _____
 Does your dog have any overly sensitive areas on his body? _____

Medications (Please list all medications)

Name _____ Frequency _____ Quantity _____
 Name _____ Frequency _____ Quantity _____
 Feeding instructions for lunch/boarding: (Qty/ time of day) _____

Behavior Profile				
	Yes	No	Unsure	Comments
Aggression towards dogs				
Aggression towards people				
Excessive barking				
Excessive chewing				
Toy possessive				
Jumping or climbing fences				
Jumping on people				
Shares toys well				
Very submissive towards dogs				
Very submissive towards people				
Digging				
Eating stool				
Plays rough				

Additional Information

How long have you owned your dog? _____ Is your dog housebroken? _____
 Where did you get him? (breeder/shelter, etc) _____
 What kinds of toys and games does your dog prefer? _____
 Has your dog ever seriously bitten either a dog or person? _____
 Is there anything that tends to frighten your dog? _____
 Does your dog prefer any specific breeds, sexes, or sizes of dogs? _____
 Has your dog had any formal obedience training? What level? _____
 How frequently does your dog socialize? (daycare/dog park) _____
 Please rate your dog's energy level. 1-very calm to 10-very active _____



Client Agreement

Please read and initial each line below:

_____ I acknowledge and understand that there are certain risks involved in participating in group socialization of dogs, including, but not limited to broken nails, abrasions and cuts, raw paw, dog fights, dog bites to humans or other dogs as well as the transmission of communicable illnesses, such as kennel cough, puppy warts and/or parasites.

_____ I further understand that any problems with my dog, behavioral, medical or otherwise, will be treated at the staff's discretion. I assume full financial responsibility and all liability for any and all expenses in regards to the behavior and health of my dog.

_____ If my dog becomes ill or injured, Central Park shall have the right to call a veterinarian of their choice; or to administer medicine or give other advisable attention, within their judgment, and such expenses, being reasonable in amount, shall be paid promptly by me, the owner of the dog.

_____ I understand that I am solely financially responsible for any damage or harm caused by my dog(s) while under the care of Central Park.

_____ I agree that in admitting my dog(s) to Central Park, they have relied on my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or other dog.

_____ If my dog cannot safely adapt to the group daycare environment, Central Park shall have the right to place my dog in a traditional kennel of their choice.

_____ All dogs are subject to a temperament test upon enrollment. Temperament tests are a fee of \$11 per dog.

_____ I understand that if I do not cancel my dog's reservation within 24 hours, that I will be subject to applicable charges.

_____ I understand that I will be charged for any late pick up of my dog. Late charge for after-hours pick-up is \$10 per dog. Late pick up time is 7-7:15pm.

_____ I understand that I will be charged an unscheduled boarding fee of \$70 per dog, per night for any dog that is left past 7:15pm. (Dogs left at the May location will be transferred to the Classen location to board. We do not board at the May location.)

_____ I give my permission for images and likenesses of my dog to be used on the internet, in social media and in publications or promotions.

By signing below, I am acknowledging that I have read, understand and agree with the above.

Signature: _____ Date: _____