

TODAY'S DATE: _____ INTERVIEW GIVEN BY: _____

PETROPOLIS PARK

The Cageless Boarding / Doggie Daycare Retreat

2112 Washington Street Hollywood, Florida 33020 Phone: 954-923-7768 Fax: 954-926-7768 www.petropolispark.com

NEW CLIENT ENROLLMENT APPLICATION + INTERVIEW TOPICS FOR DISCUSSION

Thank you for taking the time to provide us with this important information. The answers do not determine whether or not your dog is accepted at Petropolis Park. They simply give us a better understanding of your dog's personality, behavior, temperament and history. The detail requested in this application is, admittedly, lengthy; but it is a vital tool and an invaluable reference that allows us to give your dog the best possible care and attention. If time is an issue, kindly complete as much of the application as you can now, and we will address any outstanding topics during the interview.

(For multiple dog families, it will be necessary to fill out a separate profile for each dog you wish to enroll in daycare or sleepover).

Owner's Information

Name(s): _____ Pet's Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Daytime Phone: _____ Cell Phone: _____

Evening Phone: _____ Email address: _____

Emergency person to contact in case we cannot reach you:

Name: _____ Phone: _____

Dog Information

Breed/Mix: _____ Sex: Male Female

Color: _____ Spayed/Neutered? YES NO

Weight: _____ Age: _____ Birthday (if known): _____ Tattoo/Microchip # _____

Distinctive markings: _____

Veterinarian Information

Name/Hospital: _____

Address: _____

Phone: _____ Fax: _____

OWNER'S NAME: _____

DOG'S NAME: _____

HOW DID YOU HEAR ABOUT US? Friend or client (we like to reward our referrals!); vet; groomer; pet retail

establishment, web search, Yellow Pages, media publication or broadcast, etc.): _____

Pet Profile

How long have you had your dog? _____

How old was your dog when you first obtained him/her? _____ How or where did you obtain your dog? _____

If adopted, what knowledge do you have of your dog's history? _____

How many adults live in your household? _____ Children? (include ages) _____

Are there any other animals in the household? Please list species, gender, and age of each. _____

How does your dog get along with these animals? _____

Medical

Which flea/tick preventatives do you use on your dog? _____ How often is it applied? _____

What heartworm preventative do you give your dog? _____ How often is it administered? _____

Is your dog currently taking any medications? _____ If yes, what are they? _____

Does your dog have any physical condition or health issues that would cause restrictions on activities and movements--e.g.

Orthopedic problems such as hip dysplasia, arthritis, loose kneecaps)? If so, describe: _____

Does your dog have any allergies? _____

Does your dog have any dietary restrictions? _____

Does your dog have any other medical conditions or ailments we should be made aware of? Please circle any that apply (or add

others) and explain:

Epilepsy/Seizures

Skin Irritations/Hot Spots

Ear Infection/Ear Mites

Teeth

Heart

Sensitive Stomach

Ringworm

Tapeworm

Did your dog ever have mange (if yes, when)? _____ Canine (kennel) cough? _____

Behavior/Habits

How much and how often do you feed your dog? _____

Brand of food: DRY _____ WET _____

Is your dog permitted to have table food? YES NO SOMETIMES Is (s)he allowed snacks/treats? If so, what kinds? _____

Would you allow us to provide treats on occasion as a reward or between meals when your dog appears hungry (we typically serve Mother Hubbard, Original Milk Bone or Merrick Lamb/Liver Training Treats)? _____

Is your dog housebroken? YES NO How many elimination walks do you give your dog per day? _____

Is your dog aggressive or more aggressive on leash? _____ How about, off leash? _____

Was (s)he crate-trained? YES NO Does your dog still nap or sleep in a crate? (NOTE: Please be advised that for your dog's safety and protection, (s)he may be crated briefly, and only temporarily, during meal times) _____

Has your dog had any formal obedience training or classes? Please describe (e.g. Group classes, Puppy Kindergarten, private instruction) _____

Does your dog know any special tricks or commands? _____

Is your dog at all "mouthy" or does (s)he like to play bite or nibble on you and or other humans? _____

Does your dog growl much? _____ Is it a play growl or a warning growl? _____

Does (s)he tend to "hump" other dogs (if so, specify if the behavior is seen more with male or female dogs)? _____

_____ With humans? _____

_____ What command/aversive do you use to discourage or stop it? _____

Does your dog jump up on you? _____ On others? _____

Do you correct this behavior or not? _____

Does your dog tend to jump fences or is (s)he an "escape artist"? _____

Is there anything in particular that triggers your dog to bark more often, louder or excessively? _____

Does your experience any significant separation anxiety when you leave home, or show any destructive behaviors when you are away for a few hours? _____

Has your dog ever bitten anyone? _____ What were the circumstances? _____

Personality

Overall, how would you describe your dog's temperament and personality? _____

Rate your dog's energy level, "1" being laidback/mellow and "10" being a nonstop, indefatigable "Terminator" _____

Does your dog get along well with other dogs? _____

Does your dog prefer to play with any specific breed or size of dog, or prefer one sex over the other? _____

How does your dog respond and react to the following:

Older dogs _____

Puppies _____

Dogs of the opposite sex _____

If female, other female dogs _____

If male, other male dogs _____

Unneutered (intact) males _____

Humans (Men) _____

Humans (Women) _____

How does your dog react to strangers approaching the home or yard? _____

Does your dog play off-leash with any other dogs (say, at a dog park)? Briefly describe: _____

Are YOU afraid of any types of dogs? _____

Does your dog like playing in/with water? _____

Will your dog jump in a shallow "kiddie" pool? _____

Can (s)he "swim" easily in a deeper pool or is comfortable going in to a lake or the ocean? _____

Is there any reason you would NOT want your dog to swim or play with other dogs in our pools? _____

Does your dog play with any particular toys? If yes, what type of toys and what kinds of games does (s)he enjoy most? _____

How does your dog react when you or somebody else tries to take food, toys or other objects from him/her? _____

When playing, is there anything (s)he obsesses or gets compulsive about (e.g. must fetch and hold on to the ball, chases shadows and light sources/reflections, etc)? _____

Is your dog frightened by any noises? _____

Are there any kinds of people or situations your dog automatically fears or dislikes? _____

Does your dog mind being picked up or is (s)he sensitive about any parts of his/her body? _____

Where does your dog like most to be petted? _____

How does your dog react when being brushed? _____

When being bathed? _____

How well does your dog cope with Florida's summer weather (humidity, hot sun) and how long is (s)he able to tolerate playing outdoors? _____

Does your dog object to going outdoors when it is raining? _____

Does your dog give hugs and kisses? _____

Does your dog enjoy getting hugs and kisses /belly rubs ('cause we like giving them!!)? _____

Please list any comments about your dog that you feel will be helpful to us. _____

IMPORTANT REMINDER

We must have a copy of your dog's vaccination records before participating in any trial days. Kindly have your veterinarian fax the records directly to us at 954-926-7668. Once again, thank you for your cooperation.