



Boarding/Daycare Enrollment Application

“Where Your Pet is On Vacation Too” & “We’ll Bark If we want too”

BOARDING & DAYCARE REQUIREMENTS: Must be up to date on the following: Bordetella, Parvo, Distemper, Rabies and fecal (every year). *To participate in group play, dogs must be spayed or neutered. *Must not be aggressive towards people or dogs or aggressive over toys or food. *We must be able to handle by collar or leash & a reasonable level of Training. *Must be on an over-the-counter flea/tick preventative medication. *Please complete entire application. We look forward in meeting you!

Orientation Required Appointment: Date _____ Time _____

Services of Interest 1 Daycare 1 Boarding 1 Spa 1 Training

PET-PARENT INFORMATION:

Pet Parent #1 _____ Phone: _____

Dr.Lic # _____ St. _____ Email: _____ Address: _____

_____ City: _____ Zip: _____ Work Place _____

Veterinarian Name/Address _____ Phone# _____

Pet Parent #2 _____ Phone: _____

Number of dogs enrolling: _____ If more than one dog, please complete an “additional” dog registration form for each dog.

How did you hear about Bubbles & Bows? _____

PETS NAME: _____ Breed/Description: _____

Color/Markings _____ Spayed/Neutered*? 1 Yes 1 No

Weight: _____ Birthdate _____ Age: _____ Gender 1 F 1 M

YOUR PETS FEEDING INSTRUCTIONS:

FEEDING INSTRUCTIONS: Food Type/Name _____ **Amount** _____

Daily _____ **Strict Diet or Any Allergies? Explain** _____

UNDERSTANDING ACTIVITIES, FUN & RESPONSIBILITIES OF PROGRAMS AT THE RESORT!!!

*** If Enrolled in Social Group I agree/give permission for my pet/pets to interact/socialize & participate in Play Groups with other pets while in the care of Bubbles & Bows & that my Dog has Proper Social Skills not to harm others if Agreed & Signed up by Bubbles & Bows to be Involved in Groups.**

*** I take Full Responsibility of my Dog & have Provided Full & Proper Information of my Dogs Behavior to Assure No Harm would come from my Dog during Social Play Groups or any other Programs at Bubbles & Bows. I Understand & give Permission to the Professional Team at Bubbles & Bows that has the Ability to Make the Best Decisions, whether my Dog Interacts w/Others, Participates in Programs & All Activities for the Top Concern & Well Being of All Dogs** _____

*** At B & B Facility we believe in putting the Well-Being & Safety of every dog first is why we have Assessment & Continued Monitoring to ensure every dog is Healthy, Happy & Thriving. We All understand with different Behavioral Traits, Personalities & Owner Handling Styles, that a Doggie Daycare Environment may not be the Best for Everyone as also Behaviors can Change with Age. This is our Commitment & Responsibility to Every Dog & their Family.**

**** I** _____ **Agree & Believe that Bubbles & Bows has Top Priority of the Well Being of my K9 companion & Understand at any time my Dog is Showing Signs of being Uncomfortable in a Social Environment, Reactive or Overexcitement other Alternatives will be Excepted by our Family with Positive Reinforcement from both Parties. We are here to Build a Positive, Safe & Thriving Environment for each & every Pet at our Resort & Look forward in Growing with your Family.**

EMERGENCY CONTACT INFORMATION: >For Facility Use Only if needed by us.

Name: _____ **Phone:** _____

Relationship: _____ **#2** _____

***Note: Under any Circumstances, Only the Parent/Parents that Signed up the Applied Dog that we have already Met is Allowed to pick up your Pet at any time. No other family members, neighbors, friends etc. is Allowed for the Safety of your Family K9 Member.**

***Note: All dogs over the age of 6 months old, or those exhibiting early onset adolescence, must be spayed or neutered to be in Social Play Groups.**

Where did you get your dog from? 1 Breeder 1 Rescue/Shelter 1 Re-Homed 1 Found
How long have you had your dog? _____

Any known history that can help us, please describe: _____

Has your dog been in an open play daycare/boarding before? 1 Yes 1 No If so Where?
_____ Last Visit? _____ Experience? _____

If your dog has been in open play daycare or boarding before, what did you like the most and least about your last daycare/boarding provider?

Like Most: _____

Like Least: _____

Is/has your dog (check all that apply):

1 Crate Trained/House Broken _____

1 Escaped a crate/door, if checked explain: _____

1 Climbed/Jumped fences, if checked explain: _____

1 Eaten stool or other foreign objects, if checked explain: _____

1 Does your dog go to dog parks or other off-leash environments? if yes, how are he/her social skills:

***Does your Dog Wear or have Used a Training Collar of Any Type at Home throughout their Entire Life at any time? 1 Yes 1 No Explain**

***Has your Dog had any type of a Training Program? 1 Yes 1 No**
If so Where & When? _____

Hold Harmless and Indemnification Agreement: SIGN & INITIAL ALL SPACES!

I, _____, owner of the above named dog attending Bubbles & Bows programs and services, fully understand and agree that: 1) Bubbles & Bows Inc. Shall not be liable for any injury or damage to any person or persons, animal or animals, or to any property, however caused, which results from any services provided or behavior of said pets as well as from any negligence on the part of any other pet owners participating in any services provided by Bubbles & Bows Inc. And 2) I will hold Bubbles & Bows Tropical Pet Resort & Spa Inc. And its employees harmless from fees or expenses incurred in connection with any claim, action or proceeding occurring as a result of my pet's participation in any program.

***I have read & understand policies & my arranged pickup & drop off times that was personally arranged for me & my pet & fully understand & agree to all of the above & will notify Bubbles**

& Bows of any Changes to assess how to rearrange our Dogs Program. As we thrive to accommodate our families to the best of our ability to take all families in consideration & respect their services, we do not allow any late pickups under any circumstances to give full attention to our K9 Attendees that are staying at the facility for the fun & activities for the fairness of all.

Owners Signature _____ Date _____
Bubbles & Bows Tropical Pet Resort & Spa Inc.

***NOTE ~ NO One but You is Ever Allowed to pick up your Pet for the Safety & Security of your Pet while in our Care! Your Pets Up Most Safety & Fun is our Top Priority & Commitment! (Please Discuss with Us Any Questions/Concerns)**

**** Owner Agreement ** Initial All Spaces Please**

I, _____, hereby certify that my dog(s): _____ Is (are) in good health and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) have not harmed or shown aggressive or threatening behavior towards any person or any other dog. I have read and understand the following:

1. <I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending Bubbles & Bows facility for all programs provided.
2. <I further understand and agree that in admitting my dog(s) to Bubbles & Bows, we 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 any other dog.
3. <I further understand and agree that Bubbles & Bows and their Staff will not be liable for any problems which develop, provided that reasonable care and precautions are followed, and I hereby release them of any liability of any kind arising from my dog(s) attendance and participation in all programs my dog(s) are involved in.
4. <Inherent Risks of Play, Spa, Boarding & Grooming. I understand that Bubbles and Bows is an open-play environment and because of this there are inherent risks, which even when closely monitored, may result in the following:
 - a. Transfer of communicable parasites or an illness such as, but not limited to, the canine papilloma virus also known as “puppy warts,” or an upper respiratory illness like Kennel Cough, which can be caused by a contagious bacteria or virus.
 - b. Injuries, usually benign, such as broken nails, sore pads, puncture wounds, abrasions and cuts, particularly in shorter coated breeds, etc.
5. <I Release Bubbles and Bows and their team will not be liable for any health or behavioral problems that develop in my dog(s), and I hereby release them of any liability of any kind whatsoever arising from my dog(s) attendance and participation at Bubbles and Bows. I am solely responsible for any harm, including to any other dog(s), to the employees or invitees of Bubbles and Bows, or to the equipment, physical plant, or other property of Bubbles and Bows caused by my dog(s) while my dog(s) is/are attending Bubbles and Bows.

My Dog... Please check all that apply:

- 1 Barks at dogs while on leash 1 Barks at dogs that pass by the house 1 Is shy/nervous around dogs
1 Likes to be chased by other dogs 1 Likes to chase other dogs 1 Plays rough 1 Likes to hunt small animals
1 Over Excited with Humans or Dogs Which commands does your dog know? (Please check all that apply.)
1 Sit 1 Down 1 Stay 1 Come 1 Heel 1 Leave It 1 Go to Crate 1 Other: (describe)

HEALTH HISTORY * Check any that have occurred in the last 6 months:**

- 1 Ear Infections 1 Eye Infections 1 Allergies 1 Gastritis/Bloat 1 Heartworms**
1 Tapeworms 1 Canine Cough 1 Heat Stroke 1 Seizures 1 Fleas/Ticks

Additional Health Concerns:

- 1 Heart 1 Vision 1 Hearing 1 Skin 1 Hip/Elbow/Knee 1 Surgeries (describe):**

- *Preventative Health Maintenance: 1 Current Flea/Tick 1 Current Heartworm**

This section is for any medications that need to be administered:

Medication Name _____ / _____ Dosage _____

Mon. AM _____ Initials Who Adm. _____ / Mon. PM _____ Initial Who Adm. _____

Tues. AM _____ Initials Who Adm. _____ / Tues. PM _____ Initial Who Adm. _____

Wed. AM _____ Initials Who Adm. _____ / Wed. PM _____ Initial Who Adm. _____

Thurs. AM _____ Initials Who Adm. _____ / Thurs. PM _____ Initial Who Adm. _____

Fri. AM _____ Initials Who Adm. _____ / Fri. PM _____ Initial Who Adm. _____

Sat.. AM _____ Initials Who Adm. _____ / Sat. PM _____ Initial Who Adm. _____

Sun. AM _____ Initials Who Adm. _____ / Sun. PM _____ Initial Who Adm. _____

