



Pewaukee Veterinary Service & All Pets Inn

N29W23950 Schuett Dr. Pewaukee WI 53072

Phone: (262) 347-0787 Fax: (262)347-0780 Site: www.pewaukeeveterinaryservice.com

Enrollment Application

Please complete the following questions to the best of your knowledge. This information will help us maintain a safe and fun environment for all guests. We are concerned not only about your dog's safety and health, but also that of our other guests and our team of caretakers. Please take a few moments to tell us about yourself and your best friend. Thank you.

Note:

All dogs are required to be spayed or neutered unless they are less than six (6) months of age.

We require written proof of vaccinations from your vet, including a negative fecal exam.

Flea & Tick preventative and Heartworm preventative are required year round.

In order to ensure a good fit with All Pets Inn Dog Day Care, please return this packet at least one (1) week prior to your first reservation. A Pet Care Services member will review and approve the packet or set up a time with to meet you and your dog(s).

A friendly reminder:

Guests who participate in group activities may get scratched or bumped when playing with other dogs. Just like human children on a playground, they may incur mild injuries or become soiled from running and wrestling. Please expect to see these types of things on occasion. A Pet Care Services member will always make you aware of any active aggression; otherwise, please do not be alarmed by scratches or teeth marks.

**Thank you for choosing Pewaukee Veterinary Service & All Pets Inn!
We look forward to making your dog's dreams come true!**

Client Information

Pet Parent One:

Last name _____ First name _____
Street Address _____
City _____ State _____ Zip _____
Home Phone _____ Work Phone _____ Ext. _____
Cell phone _____
Email Address _____

Note: Pewaukee Veterinary Service & All Pets Inn will not sell, release, or distribute any e-mail addresses.

Pet Parent Two:

Last name _____ First name _____
Street Address _____
City _____ State _____ Zip _____
Home Phone _____ Work Phone _____ Ext. _____
Cell phone _____
Email Address _____

Note: Pewaukee Veterinary Service & All Pets Inn will not sell, release, or distribute any e-mail addresses.

Emergency Contact: (Other than the parents)

Emergency contact last name _____ First name _____
Emergency contact phone numbers: Home Phone _____
Work Phone _____ Cell Phone _____
Please list the name(s) of those authorized to drop-off/pick-up your dog:
(We will only release your dog to the names listed below.) _____

How did you hear about us? _____

I am interested in: Daycare Boarding Both

Pet Profile

Dog's name _____ Nickname(s) _____
Breed _____ Age _____ Please circle: Male Female
Birth date ____/____/____ Color _____
Weight _____ Distinguishing marks _____

- Required by 6 months of age -

Is your dog spayed or neutered? YES NO Scheduled for _____

How long has your dog been a member of your family? _____

If adopted, do you have knowledge of your dogs past history? Yes No

If yes, please describe: _____

Has your dog ever attended daycare before? _____

How was the experience? _____

Has your dog ever been boarded before? _____

How was the experience? _____

Has your dog ever been to the dog park? _____

How was the experience? _____

Is your dog licensed? Yes No Dog license number _____

Where does your dog typically sleep? Crate Floor Furniture Dog bed Other _____

Total number of people in your household _____ Adult males _____ Adult Females _____

Number of children/age _____

Has your dog had experience with children? Yes No Does your dog like children? Yes No

Are there other animals in your household? If yes, please describe (name, species, breed, spayed/neutered, age): _____

Describe how your dog gets along with other animals in your household: _____

Has your dog had any socialization with other dogs? _____

How does your dog react to new people and/or dogs coming into your house/yard? _____

Has your dog ever bitten another person? If yes, please describe the situation: _____

Has your dog ever bitten another dog? If yes, please describe: _____

Has your dog growled or snapped at another person? If yes, please describe: _____

Has your dog growled or snapped at another dog? If yes, please describe: _____

How does your dog respond to other dogs approaching when you're out on a walk? _____

Is your dog fearful or reactive around certain types of dogs or people? _____

Please check any of the following behaviors that apply to your dog:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> separation anxiety | <input type="checkbox"/> toy/food possessive | <input type="checkbox"/> sensitive to touch | <input type="checkbox"/> fear of children |
| <input type="checkbox"/> excessive barking | <input type="checkbox"/> not house trained | <input type="checkbox"/> fear aggressive | <input type="checkbox"/> fear of women |
| <input type="checkbox"/> coprophagia (eats stool) | <input type="checkbox"/> mouthiness | <input type="checkbox"/> fear of thunder | <input type="checkbox"/> digs under fences |
| <input type="checkbox"/> destructive/chewing
(i.e. bedding) | <input type="checkbox"/> fear of loud noises | <input type="checkbox"/> fear of men | |

Other problem areas (please describe): _____

Grooming

How does your dog react to being bathed? _____
How often do you brush your dog? _____ Does your dog like to be brushed? Yes No
If not, what have you tried to make it more enjoyable? _____

How does your dog react to having his/her nails trimmed? _____
Does your dog have any sensitive areas on his/her body? _____
Does your dog have any sensitive areas on his/her body that he does not like touched? Yes No
Where? _____
Does your dog have favorite petting spots? _____

Behavior

Has your dog had any basic obedience training? Yes No
Please circle known commands:

Sit Down Wait Stay Come Off Okay
Enough Outside Inside Go Potty Settle Back Leave It

Other known commands, hand signals, or tricks: _____

Does your dog have a quiet command? _____
Does your dog have any play commands? _____
Does your dog have a bathroom command? Yes No If yes, please describe: _____

When your dog has to go to the bathroom he/she will:
bark whine sit by the door pace around the door ring bell on door other

Is your dog afraid of any specific items or noises? Yes No If yes, please describe: _____

What does your dog do to show he/she is happy? _____
What does your dog do to show he/she is stressed? _____

What are your dog's favorite toys to play with? _____

Are you able to remove things from your dog's mouth? _____
What kind of games does your dog like to play with other dogs? _____

What kind of games does your dog like to play with people? _____

What are you and your dog looking forward to at All Pets Inn? _____



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Dog's Veterinarian Information

Veterinarian: Dr. _____ at _____ Hospital/Clinic
Address _____
Clinic phone number _____ Clinic Fax number _____
Date of last complete physical exam _____

Vaccinations

The following vaccinations are required and must have been administered within the past 7 days to 11 months to enroll at All Pets Inn. We require **proof of all vaccinations**; these can be faxed, mailed, or dropped off in a hard copy.

Rabies
DHLPP
Bordetella

Date of last fecal exam (for intestinal parasites)** _____

** Negative fecal exams are required every 12 months.

Is your dog on flea/tick prevention? Yes No
Brand used and last date administered _____

Is your dog on heartworm prevention? Yes No
Brand used and last date administered _____

*Flea/tick and heartworm prevention are required year round.

Does your dog have any hip/joint problems or restrictions? Yes No
If yes, what restrictions need to be observed with regards to your dog's activities or movements?

Please describe your dog's general health. (Include any current medical conditions of which we should be aware of.)

Does your dog have any known allergies? Yes No
What is he/she allergic to and what are the symptoms? _____

What is the treatment? _____

What type of food do you feed your dog? _____ wet ____ dry ____
Amount per serving _____ Feeding times: morning ____ afternoon ____ evening ____
Does your dog have any food restrictions? Yes No
If yes, what are they? _____

Please list any current medications your dog is taking and the frequency and time administered.

Is your dog allowed to have dog biscuits and training treats provided by All Pets Inn? Yes No

Emergency Medical Release

Instructions in case of an emergency:

- _____ Treat my dog as our veterinarians see fit.
- _____ Keep my pet comfortable, wait for further instructions.

In case of any emergency situation or injury, you will be contacted immediately. If we are unable to reach you or your emergency contact and if immediate medical attention is required, Pewaukee Veterinary Service/All Pets Inn in its sole discretion may engage the services for the veterinarians through Pewaukee Veterinary Service administer medicine and/or give other requisite attention to your pet(s) and the expenses thereof shall be paid by the owner. If the situation is severe, we will transport your dog to an emergency veterinary hospital located at Wisconsin Veterinary Referral Center. If the situation does not require immediate attention, you will be contacted and advised of the situation and we will follow your instructions.

I/We, the owner(s) and pet parent(s) of _____ understand that there are inherent risks to bringing my/our dog to a doggie daycare and boarding. In the event of serious injury and/or illness, I/we hereby give consent to Pewaukee Veterinary Service & All Pets Inn and its employees to act on my/our behalf, in the event that we cannot be contacted, to authorize and/or refuse any necessary medical treatment while under the care of the aforementioned. I/We understand that I/we will be responsible for any and all costs incurred for such treatment.

Pet Parent Signature: _____ Date: _____

Pet Parent Signature: _____ Date: _____

This document may not be altered in any manner. Any changes will be considered null and void without written consent from the All Pets Inn Manager.



Rules and Regulations

To ensure the safety and health of all animals and staff at All Pets Inn, all clients are required to comply with the following Rules and Regulations (**please read thoroughly**):

Sex: All dogs must be spayed or neutered (unless they are under 6 months of age).

Vaccines & Preventative: All dogs must be up to date on vaccinations; we also accept titers. All clients must submit **written verification** from their veterinarian that their dog(s) have current DHLPP, Rabies and Bordetella (k-9 cough) vaccinations. Specifically, the vaccines required are: 1) DHLPP; 2) Rabies; and 3) Bordetella. All dogs are also required to be on 4) flea preventative and 5) heartworm prevention **year round**. Results of current fecal exam are necessary to verify that none of our canine clients have intestinal parasites that may spread to other dogs. 6) We require written proof of a negative fecal exam every 12 months. It is your responsibility to provide on-going verification of current vaccinations and preventative. Spot checking for fleas and ticks is not always a fool proof process; therefore, All Pets Inn requires a flea and parasite preventative (i.e., Vectra, Frontline) for incoming dogs. **We do not accept flea/tick collars.**

Health: All dogs must be in good health. All clients will need to certify that their dog(s) are in good health and have been free from any condition that could potentially jeopardize other canine guests. Dogs that have been ill with a communicable condition in the last 30 days will require written veterinary certification of health to be admitted or readmitted. If, at any time during our care, it becomes evident that your dog is ill, you'll be notified and expected to pick up your dog immediately. If, at any time during our care, it becomes evident your dog has fleas or ticks, treatment will be applied and charged to the pet parent at a minimum rate of \$30.00. Dogs requiring special attention due to medical restrictions will be assessed and charged an additional per day fee for any and all boarding stays (this includes medicines that need to be administered via injection).

Leashes and Collars: All dogs must enter and exit the facility on a leash.

Food: All food brought to All Pets Inn must be stored in sealed plastic container or baggies labeled with the dog's first and last name.

Bedding: Please be advised that we are unable to wash any bedding that is too large to fit in our washer and dryer. We are not responsible for lost or stolen items.

Treats: In order to provide your dog with a positive learning experience while at All Pets Inn, we will reinforce your dog's good behavior and ignore unwanted behaviors such as jumping, etc. Your dog will be given treats as a reward for good behavior, unless otherwise instructed by you. These treats are given in small bite-size quantities.

Behavior: All dogs must pass the All Pets Inn Behavior Assessment for enrollment in our program. *Parents will need to certify that their dog(s) have not harmed or shown any aggressive or threatening behavior towards any person. In the event that the guest will participate in daycare or group play, parents will also need to certify that their dog(s) have not harmed or shown any aggressive or threatening behavior towards any other dog(s) and are not protective of food or toys. The dogs' safety and health is our main priority. **Keep in mind that although your dog is supervised when playing with other dogs, he/she still might receive an occasional nip or scratch.***

Dogs that are not social with other dogs may stay in the boarding facility but may not participate in daycare or group play time. Non-social boarding guests can receive a private play time or a walk around the neighborhood in lieu of group play time for an extra fee per activity.

Age: All dogs must be at least 10 weeks of age and have their first two sets of vaccinations.

Enrollment: Enrollment Applications are required to be turned in at least one (1) week prior to your dog's/dogs' first reservation. *All dogs must have a complete, up-to-date and approved Enrollment Application on file.*

Fees: *All day care fees are payable at check-in.* Fees for boarding guests are due at check-out, unless arrangements for Saturday or Sunday evening check out have been set up in advance in this case all payments are due upon check - in. Cash, check, Visa/MC and Discover are accepted. A \$30.00 fee will be applied for any returned check.

Hours of Operation:

Day Care check - in: Monday-Friday: 7:00 a.m. - 8:30 a.m.

Day Care check - out: Monday – Friday by 6:00 p.m.

(Note: anything after 6:00 pm will incur a late fee and/or boarding charges will apply)

Boarding check-in and check-out: Monday-Friday: 8:00 am - 6:00 p.m.

Saturday: 8:00 a.m. - 12:00 pm.

Saturday and Sunday **check - out only** 5:00 -7:00 p.m.

Day Care: All Pets Inn closes promptly at 6:00 p.m. Late charges of \$15.00 will be applied. All no shows for Daycare will incur a boarding charge along with the regular day care charge.

Reservations & Cancellations: Reservations are required along with a credit card number to be kept on file. Notification of a cancellation must be provided **5 business days prior to check-in during holidays and peak periods** and **48 hours prior to check-in during all other times.** Reservations not cancelled by the aforementioned time will be charged in full and invoiced to the parent. Holidays and peak periods include New Year's Eve, New Year's Day Easter/Spring break week, Memorial Day weekend, Fourth of July week, Labor Day weekend, Thanksgiving Day, and Christmas Eve and Christmas Day. Please feel free to speak with a team member at any time for additional clarification.

I certify that I have read the Rules and Regulations and understand, and agree and intend on my own behalf, and on behalf of my agents, representatives, relatives, successors, and assigns, to be bound by all the terms and conditions contained in the Rules and Regulations.

Pet Parent Signature _____ **Date:** _____

Pet Parent Signature _____ **Date:** _____

Rules and Regulations are subject to change at any time without notice. This document may not be altered in any manner. Any changes will be considered null and void without written consent from the All Pets Inn Manager.

Client Agreement

All statements must be initialed and the agreement signed for your dog(s) to have membership with All Pets Inn. This document may not be altered in any manner. Any changes will be considered null and void without written consent from the All Pets Inn Manager.

Please read the following and initial after each number.

1. ___ I understand that All Pets Inn has relied on my information provided and will rely on the contents of this Agreement, that my dog(s) is/are in good health, is/are up-to-date on all required vaccinations, has not had any communicable condition in the last 30 days and has not harmed or demonstrated aggressive or threatening behavior towards any human being and/or another animal.
2. ___ Non-social dogs are welcome in boarding but not the day care.
3. ___ I certify that my dog is spayed/neutered or under the age of 6 months.
4. ___ Dogs not regularly exposed to the level of activity at dog daycare may feel the discomfort of sore muscles, sore joints, and fatigue.
5. ___ Dogs not regularly exposed to outside activity or play on hard surfaces may experience sore paws, blisters, bruises or abrasions on the feet.
6. ___ Dogs at play during regular day care do get dirty. Dogs with longer hair can get matted from the level of activity during day care. You are welcome to schedule your dog for grooming appointment along with day care at normal grooming charges. Please ask a team member to help schedule a grooming appointment.
7. ___ Excessively long toenails may cause injury. You will be notified if your dog's nails are too long. If, at your next visit, the nails have not been trimmed, All Pets Inn/Grooming will trim them and charge you for the service.
8. ___ Fresh water is available at all times of play; however, your dog may still be thirsty after day care. Please be aware of their water intake; excessive amounts may cause an upset stomach or other problems.
9. ___ All Pets Inn takes all reasonable steps to provide a safe and stimulating environment for dogs in its care. ***I do, however, recognize that there are inherent risks of illness or injury when dealing with animals in this type of environment.*** Dogs not regularly socialized do not necessarily know how to behave politely with other dogs. Please be aware that dogs in groups are at a higher risk of incidents including, but not limited to, bites, fights, fear aggression, object guarding, and behavior problems and/or acting out.
10. ___ I understand that I am 100% responsible for my own dog(s). All Pets Inn will not give out names and phone numbers of clients. I am 100% responsible for my own dog(s) physically, financially, in regards to health, injury or otherwise, even if it is not the fault of my own dog(s).
11. ___ Owners will be charged a replacement fee for any and all destroyed bedding (not provided by the owner) and/or room destruction. I do not hold Pewaukee Veterinary Service & All Pets Inn financially responsible for any bedding brought in and subsequently destroyed by our dog.
12. ___ I understand that I am responsible for any veterinary bills, or otherwise, incurred on my dog's/dogs' behalf by Pewaukee Veterinary Service whether or not it was something that happened at All Pets Inn or outside of All Pets Inn. I hold All Pets Inn and their customers and other customers' dogs harmless and agree to reimburse All Pets Inn for any veterinary costs, or otherwise, for my dog(s).

13. ___ I hereby grant permission to All Pets Inn, its owners, employees, contractors, and/or agents to take any and all action necessary to secure the well-being and health of my dog(s), including any medical attention deemed necessary.
14. ___ I realize there may be times when reasonable deterrent measures will become necessary to prevent injury to other dogs and/or humans, such as painless bitter apple spray (these situations are extremely rare). In the event of use, the owner will be notified.
15. ___ I understand that All Pets Inn reserves the right to refuse or revoke admittance to any dog that displays any behavior deemed dangerous or inappropriate and that does not meet the health requirements set forth in All Pets Inn "Rules and Regulations." I also understand that if my dog ever bites another dog or person that he/she cannot return to All Pets Inn daycare program.
16. ___ I also agree to indemnify All Pets Inn for any and all loss, liability, claims, expenses, demands, causes of action, suits, rights, and entitlements of any kind caused by my dog(s) during the course of daycare, or an overnight stay, including without limitation, legal costs and attorney fees.
17. ___ I agree to release and hold harmless All Pets Inn, its owners, employees, agents or otherwise from any and all loss, liability, claims, expenses, demands, causes of action, suits, rights, and entitlements of any kind, whether known or unknown, suspected or unsuspected, relating in any way to the services provided herein, including without limitation injury, death, sickness, or damage my dog(s) may suffer during or after participating in daycare or an overnight stay.
18. ___ I understand that on occasion my likeness or my dog's likeness may be captured on video or other media while staying at All Pets Inn. I hereby authorize Pewaukee Veterinary Service & All Pets Inn to use, broadcast, and/or reproduce our likeness in video, print, or other media. I agree I will not be compensated for any such use.
19. ___ Although it is the practice at All Pets Inn to have canine caretakers supervising and interacting with the dogs at all times, there may be occasions whereby your dog(s) may be outside alone for a brief time during potty breaks. I/We understand that my dog(s) may be left outside alone (or with their siblings) in a fenced-in area without supervision for brief periods of time for potty breaks.
20. ___ I understand that if my dog is not picked up within 14 calendar days after they were due to depart, they will be deemed to be abandoned. Pewaukee Veterinary Service & All Pets Inn will attempt to re-home.
21. ___ This agreement shall govern all future services to be provided by All Pets Inn to me, as authorized by me, in person, by telephone, mail, or fax.

I certify that I have read and initialed each statement listed above and accept the terms and conditions of this agreement.

Pet Parent Signature

Date

Pet Parent Signature

Date

* Please note: Prior to admittance, there may be an interview conducted to discuss your application. If such an interview is needed, you will be contacted by All Pets Inn Manager