



WAGZ DAYCARE - ENROLMENT FORM

OWNER INFORMATION:

| | | | |
|------------------------------|--|------------------------------|--|
| Name: | | | |
| Street: | | | |
| Suburb: | | Postcode: | |
| Contact No#: | | 2 nd Contact No#: | |
| Email Address: | | | |
| Emergency Contact: | | | |
| Phone Number: | | | |
| Address: | | | |
| How did you hear about WAGZ: | | | |
| Preferred Day/s: | | | |

DOG INFORMATION:

| | | | |
|----------|-----|-------------------------|-----------------------------------------------|
| Name: | | Sex: | |
| Breed: | | D.O.B: | |
| Desexed: | Yes | No *must provide reason | Vaccinated: Yes / No *must provide records |

VETERINARY INFORMATION:

| | | | |
|-----------|--|-----------|--|
| Practice: | | Phone: | |
| Street: | | | |
| Suburb: | | Postcode: | |
| Vet Name: | | | |

**FOR THE HEALTH AND SAFETY OF ALL THE DOGS THE
FOLLOWING MUST BE SIGHTED BEFORE FIRST ATTENDANCE AT
DAYCARE:**

1. VACCINATION CERTIFICATE

2. CERTIFICATE OF STERILISATION ALL

ABOUT YOUR DOG

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Where did you get your dog? | |
| How old was your dog when they came to live with you? | |
| If you adopted your dog, do you know about its history? | |
| Has your dog attended day care in the past? If so, at which day care centre? | |
| Do you have other dogs/cats? | |
| How do they get on? Are they friends? | |
| Is your dog social with new people coming into your home? Do they bark, growl, get excited, Jump? | |
| Does your dog fear or dislike any particular kind of people? Large people, people wearing hats, postmen, garbage men? If so, please describe. | |
| Has your dog displayed aggression toward another dog? If so, under what circumstances? | |
| Has your dog bitten another dog? If so, under what circumstances? | |
| Has your dog displayed aggression toward a person? If so, under what circumstances? | |

| | |
|-----------------------------------------------------------------------------|--|
| Has your dog bitten a person? If so, under what circumstances? | |
| Is your dog an "escape artist"? Do they jump fences? | |
| How does your dog respond to new dogs at the park when on the leash? | |

| | |
|-------------------------------------------------------------------------------------------------|--|
| How does your dog respond to new dogs at the park when off the leash? | |
| Is your dog afraid of things such as loud noises, e.g. thunder, motorbikes, the vacuum cleaner? | |
| Is your dog afraid of any household items, e.g. brooms, mops? | |
| Is there any area of your dog that they dislike being touched? | |
| Is your dog housetrained? | |
| Does your dog show aggression when food or toys are taken away? | |
| Do you walk your dog? How often and for how long? | |
| Does your dog socialize with other dogs? If so, how often? | |
| Is your dog afraid of/or aggressive towards large or small dogs? | |
| Are you able to remove things from your dogs' mouth? | |
| How does your dog react to puppies and younger dogs? | |
| Has your dog had obedience training? | |
| What commands do they follow? | |

| | | |
|--------------------------------------------------------|-----|----|
| Does your dog suffer from any of the following: | | |
| Mouthiness (chewing on hands, clothing, shoes etc) | Yes | No |
| Excessive barking or howling | Yes | No |
| Destructiveness | Yes | No |
| Excessive Digging | Yes | No |
| Coprophagia (the eating of faeces) | Yes | No |

| | | |
|--------------------|-----|----|
| Separation Anxiety | Yes | No |
|--------------------|-----|----|

ALL ABOUT YOUR DOGS HEALTH

| HEALTH | YES | NO | FURTHER DETAILS IF REQUIRED |
|-----------------------------------------------------------------------------------|-----|----|-----------------------------|
| Do you regularly worm your dog for both Gastrointestinal and Heartworm? | | | |
| Is your dog on a flea prevention programme? | | | |
| Does your dog have any medical condition? Do they require ongoing treatment? | | | |
| Does your dog suffer from arthritis or hip/joint problems? | | | |
| Does your dog take any medications? | | | |
| Does your dog suffer from skin irritations/allergies? | | | |
| Does your dog suffer from recurring ear infections? | | | |
| Is your dog particularly sensitive to touch in any area of their body? | | | |
| Does your dog have any particular dietary requirements? | | | |
| Is your dog allergic to bee/wasp stings? | | | |
| Does your dog have any obvious/visible lipomas? | | | |
| How does your dog react to having its nails clipped? | | | |
| Has your dog been sick recently? If so, what was the condition and the treatment? | | | |

THE MOST IMPORTANT THING AT WAGZ IS THE SAFETY OF YOUR PET AND ALL OUR VISITORS. TO ENSURE THIS WE REQUIRE THE FOLLOWING:

Dogs attending Wagz can be dropped off from 7am to 10am and picked up between 3pm and 6pm.

***A LATE PICKUP FEE** will be charged at \$15 per 15 minutes or part thereof. Please contact us on 0415 468 372 if you are running late.

Bookings – Bookings are required in advance. We are only able to take a certain number of dogs per day. No shows will be charged the daily rate if not given 24hrs notice of their absence.

Payment – Payment is required upon arrival of each attendance.

Application – All dogs must have completed all of the application detail, and have handed in/or emailed them to wagzdaycare19@gmail.com.au prior to their first Orientation Day with Wagz.

Vaccinations – All puppies must have their final puppy vaccinations before the can visit the centre. For mature dogs you must provide written proof of your dog's up to date vaccination information must be supplied on the first day of attendance.

Sex – All dogs over 6 months must be neutered or spayed.

Health – Owners must certify that their dog is in good health and has not suffered from an illness in the prior 30 days. This is to ensure the safety of all the dogs from communicable conditions.

Behaviour – We will accept the owners assurance regarding their dogs behaviour. Any behavioural issues must be documented in the application form. Wagz retains the right to refuse attendance to any dog that demonstrates unsocial or aggressive behaviour.

What to bring – All dogs must have a collar with I.D. and be on the leash at all times for arrival and departure from Wagz. Please do not bring toys or treats, as we have plenty.

Medication – If your dog requires medication please provide detailed instructions on dosage and frequency. Clearly label any medication with yours and your dogs details.



WAIVER AND RELEASE OF LIABILITY

Prior to having my dogs attend Wagz Daycare:

I acknowledge that:

- a) In admitting my dog(s), Wagz is relying on my representations that my dog(s) are in good health and have not harmed or shown aggressive behaviour towards any animal or person.
- b) Wagz is a cage free environment and I accept that there are inherent risks associated with such an environment, including (but not limited to):
 - i. Transfer of communicable illness such as kennel cough.
 - ii. Injuries, including broken nails, abrasions, cuts and sore pads.
 - iii. Behavioural problems.
 - iv. Although all dogs are carefully screened before attendance, Wagz retains the right to refuse attendance temporarily or permanently at any time.
 - v. I have read and understood this waiver and all of the Wagz Day Care rules.

I agree that:

- a) I am solely responsible for any loss, damage or harm caused or contributed by my dog(s) while it is attending Wagz Daycare.
- b) While my dog(s) is in the care of Wagz Daycare, in the case of illness or any emergency where I cannot be contacted, a representative of Wagz Daycare may seek immediate Veterinary Care for my dog.
- c) I am responsible for all costs associated with clause a) and b) above.
- d) I will abide by all rules set out above in the Wagz Daycare Waiver and Release of Liability. I accept all of the Wagz Daycare Rules and Regulations, accepting all terms, conditions and statements contained within.

I release Wagz Daycare and its employees and agents, from all liability and indemnify Wagz Daycare from any and all claims of every kind and nature whatsoever, arising directly and indirectly, from my dog(s) participation in activities or use of service and including legal claims and medical expenses.

I HAVE READ THIS AGREEMENT AND UNDERSTAND ITS TERMS AND UNDERSTAND THAT I AM WAIVERING CERTAIN LEGAL RIGHTS BY SIGNING IT:

| | | | |
|-------------|--|-------|--|
| Print Name: | | Date: | |
| Signature: | | | |