

**PLEASE NOTE WE ARE ON A WAITLIST FOR DAYCARE AT THIS TIME AND BOARDING IS LIMITED**

Requested Services <input type="checkbox"/> Daycare <input type="checkbox"/> Grooming <input type="checkbox"/> Training <input type="checkbox"/> Boarding Dates: _____		Office Use Only Entered: _____ Contacts: _____ Vaccines: _____ Scanned: _____
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**Owners Information:**

First Name:		Last Name:	
Spouse/Other:			
Address:		City:	ST: ZIP:
Email:			
Home Phone:		Spouse/Other Cell Phone:	
Cell Phone:		Text Message Enabled:	Yes NO
Spouse Email:			
Method of Contact:	Home	Cell	Email Text

**Emergency Contact:**

Name:			
Home Phone:		Cell Phone:	
Email:			

**How did you hear about us?**

Would you like a log in to our system?

Would you like a card on file?  
(Numbers will be blacked out)

Number:	EXP:	CVC:
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**Pet Information:**

Name:				
Breed:		Sex:		Spayed/Neutered:
Birthdate:		Weight		
Description:				
Current Veterinarian				
Preferred ER VET				
Please note if none is listed Chewie's will choose the best suited for the Situation				

Medical History:	
What diet is your pet currently on?	Brand: Amount: Frequency: Favorite Treats:
Does your pet have any allergies? If so please explain.	
Is your pet on Heartworm and Flea and Tick preventaion? Please list type.	
Does your pet have any medical problems? If so please explain.	
Is you pet on any medications? If so plese list them and their frequency given.	
Does your pet have restrictions on Toys or Treats?	
Any other medical comments that we need to know?	

Behavior Information:	
How long have you owned your pet?	
If your pet is adopted, do you have knowledge of your pets past history?	
Do you have other animals in the household, if so please list age and breed of each.	
In general does your pet get along with other animals?	
Does your pet your have any type of aggression? i.e. food or other animals, If so please explain.	
Does your pet have any phobias? If so please explain. People? Animals? Noises? Dogs?	
How is your pet with strangers?	
Has your pet ever bitten or growled at person or another animal? If so please explain.	
How does your pet react to a person grabbing his or her toys or food? If so please explain.	
Does your pet have any areas that it does not like to be touched?	
What commands does you pet know? Does it have special command for the bathroom?	

Waiver and Release of Liability:

THIS AGREEMENT is entered into by and between Chewie's Playland, LLC (the "Daycare") and ("Owner"). Please initial each statement.

1) I, \_\_\_\_\_, hereby certify that I own the above pets listed and the information is correct to my knowledge. I have also acknowledged that I need to provide proof of vaccinations and fecal test from my veterinarian to Chewie's Playland when asked or my pet(s) may not be allowed to board or participate in doggie daycare. \_\_\_\_\_(Initial)

2) I also hereby certify that my pet(s): is/are in good health or if they currently have medical conditions they are being treated by a veterinarian and the veterinarian has cleared them for boarding or doggie daycare. I further certify that my pet(s) has/have not shown aggressive or threatening behavior towards any person or any other animals unless otherwise stated. I further certify that my pet has not bitten any person or any other animal, unless otherwise stated. \_\_\_\_\_(Initial)

3) I will continue to provide proof of updated Rabies, Distemper combo, and kennel cough vaccinations as well as yearly negative fecal results when they have expired on my pet(s). I understand that I will need update my pet(s) health history once a year and I understand that if any health related concerns arise I will notify Chewie's Playland. \_\_\_\_\_(Initial)

4) I understand that my pet(s) will be isolated and suspended from day care if he/she shows signs of illness such as coughing, sneezing, vomiting or diarrhea and will not be allowed to attend day care until they have been well for 3t 7 days depending on the case or I provide proof from a veterinarian that they can participate in boarding or day care again. \_\_\_\_\_(Initial)

5) Chewie's takes serious measures to make sure we minimize all risks of communicable diseases that I understand that by participating in boarding or daycare that my pet(s) is more at risk for upper respiratory viruses, GI viruses or interstitial parasites. I do not hold Chewie's responsible if my pet(s) becomes ill. \_\_\_\_\_(Initial)

6) I understand that my dog(s) will be isolated or suspended from day care if he/she shows any aggressive or threatening behavior towards any person or any other dog. I also understand that my dog may be suspended from doggie day care for any poor behavior that includes, aggression, destructive behavior, continual barking etc. They may resume doggie day care once this behavior is corrected. (We are also willing to help the owners with this behavior). \_\_\_\_\_(Initial)

7) I understand and agree that during normal dog play, dogs may sustain injuries and I am responsible if treatment is needed. All dog play is monitored by staff to avoid injury, but scratches, punctures, torn ligaments, and other injuries may occur despite the best supervision. \_\_\_\_\_(Initial)

8) I further understand and agree that any behavioral or physical health problems that develop with the pets while at Chewie's will be handled and treated as deemed best by the employees, staff and volunteers of Chewie's, in their sole discretion, and I expressly agree to assume full financial responsibility for any and all expenses arising or relating thereto. This includes aggressive or destructive behavior. \_\_\_\_\_(Initial)

9) I understand that Chewie's takes extra precautions by using a martingale non slip collar when walking the dogs or letting them play in the outside fenced in area. I agree to assume full liability if my dog(s) escapes and will not hold Chewie's Liable. I understand if I sign my dog up for fieldtrips that the fieldtrips are partially off leash, by signing my dog up I am stating they are off leash trained and do not hold Chewie's responsible if my pet escapes \_\_\_\_\_(Initial)

10) I understand and agree that it is my responsibility to leave an adequate supply of food and medications for my pet(s) during their stay at Chewie's. Should the food/medication supply need replacement, I authorize Chewie's to purchase replacement and will reimburse Chewie's for cost of the food and medication plus a \$25.00 replacement fee (per occurrence) plus the actual food and medication costs. Should a dog be observed to have fleas or ticks while attending daycare, a treatment will be applied and charged to the owner at a minimum rate of \$20.00.

\_\_\_\_\_ (Initial)

11) Our caring and trained staff is happy to provide care for extremely old, chronically ill or otherwise debilitated pets requires extra care, which However, special needs pets, puppies and senior pets naturally have a higher risk of injury, stress related illness, or exacerbation of any pre-existing condition. As such, by having your special needs pet, puppy or senior pet with us you are waiving any claim for injury or illness experienced by your pet while in our care and that is not directly caused by the negligence or lack of care on the part of our staff.

\_\_\_\_\_ (Initial)

12) I also understand that in case of an emergency and I am unable to be reached, If any behavioral or physical health problems that develop while my pet is at Chewie's will be handled and treated as deemed best by the Chewie's staff. We will do what is in the best interest of th pet(s) to stabilize them or medically treat with in reason. I am aware that I will be fully responsible of all charges that will be occurred. \_\_\_\_\_ (Initial)

13) I understand and agree that if my pet(s) is/are not picked up by the end of the Chewie's regular business day, then I hereby expressly authorizes Chewie's to take my pets in to after hours care and promises to pay Chewie's all costs of continuing such care. Further, I understand that if I do not pick up my dog(s) as scheduled, Chewie's will be authorized to proceed according to the local municipal code governing abandonment of animals.

\_\_\_\_\_ (Initial)

14) I understand that pre-paid packages are nonrefundable and expire 12 months from the date of purchase. Fees are due and payable at the end of each day. Payment may be made by cash, credit card or approved checked. Discounted packages are provided only if they are paid for in advance. Our program is flexible enough to accommodate reasonable special needs requests. \_\_\_\_\_ (Initial)

15) I understand that when booking a boarding that there is a cancellation fee if not canceled within Chewie's policy. I also understand that if I do not give 24 hours notice when canceling daycare a fee or pass maybe used.

\_\_\_\_\_ (Initial)

16) I agree to allow pictures of my pets to be used on social media platforms, Chewie's Website and be sent by email or text message for updates. I understand that all photos taken of by pets by Chewie's Playland are owned by Chewie's Playland.

I further understand and expressly agree that each and every of the foregoing provisions contained in Paragraphs 1-16 above shall be in force and effect and shall apply to each and every occasion in which, I leave my pet(s) in Chewie's care. This Agreement shall remain in full force and effect as between the parties until and unless otherwise cancelled or superseded by writing signed by the parties. \_\_\_\_\_ (Initial)

\_\_\_\_\_  
Owner

Date \_\_\_\_\_

Chewie's Playland  
472 Amherst St. / 217 West Hollis Street  
Phone: 603-921-0525 Fax: 603-718-3276  
info@chewiesplayland.com



**TO BE COMPLETED ONLY IF YOU WANT TRAINING,  
THIS FORM IS TO BE COMPLETED IN ADDITION TO THE CHEWIE'S APPLICATION**

Dog Training/Behavior Questionnaire

Date: \_\_\_\_\_

**General Information:**

Owner's Name \_\_\_\_\_ Spouse/Other: \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_

Best way to reach you \_\_\_\_\_

Email address \_\_\_\_\_

**Your Pet:**

Pet's Name \_\_\_\_\_ Breed/mix \_\_\_\_\_

Age \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_ Birthdate \_\_\_\_\_

Sex		Male		Female
Spayed or Neutered? If yes, age at the time of surgery?		Yes		No
Did you notice any short or long-term changes in your dog's behavior after altering? If Yes, please explain		Yes		No
Was your dog altered because of a behavior problem? If yes, please explain		Yes		No
Does your dog have any medical conditions? If yes, please explain:		Yes		No
Is your dog currently given any medications? If yes, what medications?		Yes		No

**Environment/Lifestyle:**

Where did You Acquire Your Dog?	
Do you know the behavior of parents or litter mates?	
How old was your dog when you acquired it?	
Has the dog had previous owners? If yes, please explain	
How does your dog spend a majority of its time?	
How often your dog is exercised?	
How long is your dog exercised?	10min. 45min. 1hour 2hour
Briefly describe your dog's exercise routine:	
Does your dog have any exercise restrictions? If yes, please explain	
Has your dog been crate trained?	Yes No
Do you still use the crate?	Yes No
How many hours a day is your dog kept in the crate?	Less than: 5 hours 10 hours 15 hours

**Family Relationships:**

List each family member:

Name:	Sex:	Age:

List All Pets in your household:

Name:	Sex:	Age:	Interaction:

Has your household changed since acquiring your dog?	
Does your dog enjoy children?	

Describe how your dog reacts to guests and strangers:	
Describe your dog's behavior around other dogs:	

**Training:**

Has your dog had obedience training?	No	Yes, Group	Yes, Private	Yes, Home
How many weeks of training?				
What training school or professional trainer/behaviorist did you use?				
What training methods have you used?				
Flat Collar	Yes	No		
Martingale Collar	Yes	No		
Pinch Collar	Yes	No		
Choke Chain	Yes	No		
Choke Collar	Yes	No		
Electronic Collar	Yes	No		
Harness (Clips in back)	Yes	No		
Harness (Clips in front)	Yes	No		
Other No Pull Harness	Yes	No		
Normal 4-6' Leash	Yes	No		
Briefly describe your impressions and benefits from training				

**Behaviors:**

What do you consider your dog's most undesirable behavior?	_____		
<ul style="list-style-type: none"> <li>When did you first notice the problem?</li> <li>How would you describe the severity of this problem?</li> <li>How often does the problem occur?</li> <li>Has there been a recent change in frequency or severity?</li> </ul>	Mild	Moderate	Severe
	Frequent	Occasionally	Rarely
	Yes	No	
<ul style="list-style-type: none"> <li>Have there been any changes in the household that could help to explain the problem?</li> </ul>	Yes	No	if yes please explain: _____
<ul style="list-style-type: none"> <li>What have you done so far to correct your dog's behavior problem?</li> </ul>			
<ul style="list-style-type: none"> <li>Why do you think the dog is exhibiting the behavior problem?</li> </ul>			

**Does your dog exhibit any of the following behavior problems?**

Relevant behaviors	Approximate frequency		
House soiling(urination, defecation, marking, submissive urination)	Never	Occasionally	Often
Excessive barking or howling	Never	Occasionally	Often

Coprophagia (stool eating, other animal's feces)	Never	Occasionally	Often
Destructiveness (scratching, chewing, digging)	Never	Occasionally	Often
Jumping up (on guests or owners)	Never	Occasionally	Often
Mouthing on hands or clothing	Never	Occasionally	Often
Chases (cars, people, other dogs)	Never	Occasionally	Often
Object and food stealing	Never	Occasionally	Often
Dominance testing (pushy behavior)	Never	Occasionally	Often
Sexual behaviors (thrusting against humans, inanimate objects, roaming)	Never	Occasionally	Often
Overly submissive behavior	Never	Occasionally	Often

Response to People/animals	Growls	Glares	Bares Teeth	Snaps	Barks	Bites	Does Nothing
When eating							
When playing							
When chewing on a toy							
When approached while sleeping							
When punished							
When people visit							
When visitors enter yard							
When visitors arriving indoors							
When reached for or touched							
When being petted or hugged							
When being lifted							
When being moved off the furniture							
When trimming nails							
When cleaning ears							
When giving medications							
When grooming/bathing							
When rubbing belly							

When grasping collar							
While being put into a crate							

Any additional comments or information that you think the Trainer should know.

The Unconditional Canine Training Agreement and Release at Chewie’s Playland

This is an agreement made this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_, by and between The Unconditional Canine at Chewie’s Playland and \_\_\_\_\_ an individual, herein referred to as “Owner”.

Following are terms of service for the stay of the Owner’s pet (Name) \_\_\_\_\_ as training guest of The Unconditional Canine at Chewie’s Playland:

1. By signing this and leaving your pet with Chewie’s Playland, Owner certifies to the accuracy of all information provided to Chewie’s Playland in writing or orally about the said Pet. Owner specifically represents that he or she is the sole owner of the Pet, free and clear of all liens and encumbrances.
2. Owner has filled out the main Chewie’s Application, provided medical history and has signed and understands the agreement and waiver.
3. Owner agrees to pay the agreed upon rate and that the Pet will not leave The Unconditional Canine at Chewie’s Playland facility until all charges due, are paid by owner.
4. Owner understands that there are inherent risks with training and boarding dogs and, while not common, injuries do occur. The Unconditional Canine at Chewie’s Playland will exercise reasonable care during the Pet’s stay.
5. Owner understands that a successfully trained dog will depend, not only on the training provided to said dog by The Unconditional Canine at Chewie’s Playland, but also on the continued structure and consistency that owner must apply once the dog has returned home. Owner also understands that, after returning home, following a residency program, the said dog will need continued structured aerobic and mental exercise, to maintain a healthy and respectful relationship with its owner. Owner also understands that due to the risk of owner inconsistency and dealing with live animals that no 100% guarantee can be offered in regards to the end result of the training program. Having stated this, The Unconditional Canine at Chewie’s Playland will do everything in their ability to create successful results with said dog and owner.

This agreement represents the entire understanding between the parties hereto. It may not be modified or amended unless in writing and signed by both parties.

Owner: \_\_\_\_\_

Print Name: \_\_\_\_\_