



**Tender  
Touch**

**Dog Daycare**

**204-223-1588**

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

## TENDER TOUCH DOG DAYCARE APPLICATION FORM

(If more than one dog is applying for daycare, please fill out one form per dog).

**\*\*Please attach a copy the dog's most recent vaccination records.\*\***

(If you do not have a copy we can photocopy your original documentation and provide it back to you.)

Dog Name (first and last) \_\_\_\_\_

Breed \_\_\_\_\_

Date of Birth (if unknown, provide approximate age): \_\_\_\_\_

Weight \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Neutered (M)/Spayed (F) \_\_\_\_\_

Known Allergies \_\_\_\_\_

Health Concerns \_\_\_\_\_

Owner Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Caregiver Name(s) (if different than owner) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Primary contact name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

Alternate contact name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

Emergency contact name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

Authorized individuals who may pick up your dog:

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

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

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

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

Email: \_\_\_\_\_

Would you like to receive notifications of special events taking place at Tender Touch Dog Daycare, such as workshops, guest speakers, holiday photos, stay and play dates. Please circle one: Yes/No

Regular Veterinary Clinic: \_\_\_\_\_

Does your dog attend off-leash dog parks, playgroups, dog sports, or other daycares?

Please list locations:

\_\_\_\_\_

Has your dog ever been in a dog fight, or been attacked by other dogs? If yes, what were the circumstances?

\_\_\_\_\_

\_\_\_\_\_

List words that describe you dog's personality: \_\_\_\_\_

\_\_\_\_\_

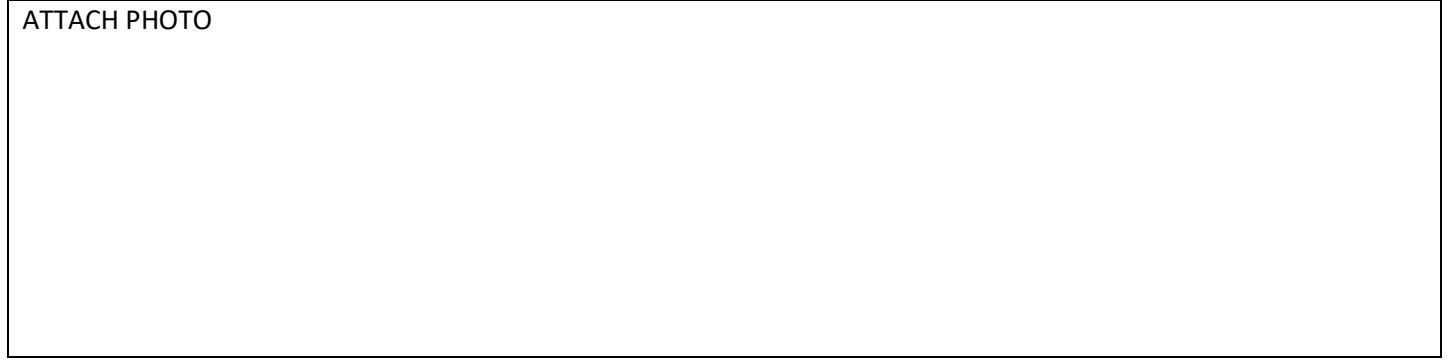
Is there anything else you would like us to know about your dog?

\_\_\_\_\_

**\*\*Please attach a copy the dog's most recent vaccination records.\*\***

To be completed by Tender Touch Dog Daycare staff:

ATTACH PHOTO



Due date

Parvovirus: \_\_\_\_\_

Distemper: \_\_\_\_\_

Rabies: \_\_\_\_\_

Bordetella: \_\_\_\_\_

Other: \_\_\_\_\_