



Intake Form

These forms must be completed and submitted before the initial screening to help us determine if your pup will be a good fit in our pack.

Dog's Name: _____

Breed: _____

Colors: _____

Weight: _____

Birthdate (year): _____

City License #: _____

Sex: Male ☐ Female ☐

Microchip #: _____

Spayed ☐ **Neutered** ☐

Tattoo: _____

Owner Information:

Owner Name(s): _____

Address: _____

City: _____

Postal Code: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Authorized Persons:

The following are the names of individuals that have your permission to pick up your dog from Salem Pup Playhouse. You understand that once dogs are released into the care of authorized persons or individuals that Salem Pup Playhouse is no longer responsible for the wellbeing of your pet.

Name: _____

Name: _____

Emergency Contact:

Name: _____

Phone: _____

Primary Veterinary Clinic:

Clinic Address: _____

Clinic Phone: _____

Vaccinations

All dogs visiting Salem Pup Playhouse must have vaccinations up to date. Owners must submit proof of vaccinations including Bordetella, Rabies, Distemper and Parvo.

Flea and Tick Prevention

Pups must be treated with your choice of flea and tick prevention. Our area has a high tick population, and the results of Lyme Disease can be detrimental to your pet's health. Your pups are a part of our family and will be in and out of our facility and on dog beds. Treatment prevents transfer of fleas among our boarders and daycare crew who all play together.

Care

Will your Pup be fed at daycare?

Yes [] No []

If yes, please specify amount of food per meal

You are responsible for supplying your dog's meals

If we need to provide food, it will come at the additional fee of \$5.00 per meal.

Medications: _____

Allergies: _____

Physical limitations or health problems:

**Please note, if your dog has been ill with a communicable or potentially communicable disease within the past 30 days a health clearance signed by a licensed veterinarian must be received before your dog can attend daycare.*

Please do not bring ill (vomiting, diarrhea, eye/ear infections) or injured (sore, limping etc.) dogs to daycare.

Pet Behavior Profile:

1. How long have you owned your dog? _____
2. Has your dog been to a daycare before? Yes [] No []
3. Is your dog comfortable with strangers? Yes [] No []
4. Does your dog get along well with larger dogs? Yes [] No []
5. Does your dog get along well with smaller dogs? Yes [] No []
6. Does your dog get along well with puppies? Yes [] No []

If you answered 'no' to any of the last four (4) questions, please describe:

Is your dog sensitive to touch on any part of their body?

Has your dog had any formal obedience training? Yes [] No [] If yes, what type, where and when?

If your dog has any special commands, you would like used, write them here:

Has your dog ever...? (If yes, please describe)

Growled at someone: _____

Bitten or snapped a person: _____

Reacted negatively when food or toys are taken: _____

Been in a fight with another dog: _____

Does your dog have any problems in the following areas? Check all that apply.

Mouthing on hands or clothing []

Coprophagia (feces eating) []

Housetraining []

Destructive chewing []

Excessive Barking []

Separation Anxiety []

Fence Jumping []

Jumping Up []

Digging []

Notes: _____
