

Every Doggie Has Its DayCare Application Form – 2026

Owner Information

Name:		Phone:
Address:		
City:	State:	Zip:
Email:		

Emergency Contact (Local)

Name:	Phone:
Vet:	Phone:

Pet Information

Pet Name(s):	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Spayed/Neutered: <input type="checkbox"/> Yes <input type="checkbox"/> No
Breed:	Color:	Weight:
Age:	Birthday:	

HOW DID YOU HEAR ABOUT US? _____

Behavior & Care

Is your dog socialized? Yes No — Describe reactions with other dogs: _____

Has your dog ever bitten a person or another dog? Yes No — If yes, explain: _____

Has your dog been in a fight? Yes No — Explain: _____

Any fears, dislikes, or triggers? Yes No — Describe: _____

Toy or food possessive? Yes No

Has shared toys/food/water with other dogs? Yes No — Any issues? _____

Has escaped or attempted to escape fencing? Yes No Describe: _____

What other exercise does your dog receive? _____

What known behavioral problems does your dog have? _____

Does your dog become frightened in certain situations? Yes No — Describe: _____

How do you calm your dog in these situations? _____

Does your dog know any commands? Yes No — Describe: _____

Any known health concerns? Yes No — Describe: _____

Any medical or activity restrictions? Yes No — Describe: _____

Currently on medication? Yes No — Describe: _____

Any allergies? Yes No — Describe: _____

Enjoys brushing? Yes No

Any areas your dog does not like touched? Yes No — Describe: _____

Favorite petting spots? Yes No — Describe: _____

Flea & Tick prevention? Yes No — Brand / Type / Frequency: _____

Anything else we should know about your dog? _____

Medical Release Form

This form is required for all Every Doggie Has Its DayCare participants receiving services.

The safety and well-being of your dog(s) is of the highest importance. While Every Doggie Has Its DayCare takes reasonable precautions to ensure pets remain safe and well cared for, some situations may be beyond our control.

In the event of a medical emergency occurring while your pet is in our care or participating in services, Every Doggie Has Its DayCare is authorized, at its sole discretion, to obtain immediate medical treatment from the closest available licensed veterinary facility. Reasonable efforts will be made to contact the owner prior to treatment when possible; however, treatment will not be delayed if immediate care is deemed necessary.

I understand and agree that I am financially responsible for any and all medical treatment my pet(s) receive as a result of a medical emergency while attending services provided by Every Doggie Has Its DayCare.

Pet Care Agreement

1. I affirm that my dog is in good health and has not shown aggressive or threatening behavior.
2. I release Every Doggie Has Its DayCare, its owners, staff and agents from liability for injuries or damages arising from participation.
3. I accept full responsibility for medical and behavioral issues involving my dog.
4. I understand there are inherent risks associated with group play and socialization and accept the risks associated with group play.
5. I grant permission for photographs and videos of my dog to be used for social media and promotional purposes.
6. I am responsible for any damage caused by my dog.
7. I authorize appropriate action if my dog is not picked up on time and will pay the costs associated with any such continuing care. If abandoned, Every Doggie Has Its Daycare will proceed in accordance with Arizona law Title 3 Agriculture 3-1310.

By signing below, I acknowledge and agree to the Medical Release Form and Pet Care Agreement above.

Owner Signature:	Date:
Printed Name:	