

DAY CAMP APPLICATION

OWNER INFORMATION	
Primary owner	Phone#
Additional owner	Phone#
Address (including city/province)	Postal Code
Email address	
Do you have Instagram? What is your handle? (Please answer N/A if not applicable)	
Does your dog have Instagram? What is his/her handle? (Please answer N/A if not applicable)	

EMERGENCY CONTACT	
Name	Phone#
Name	Phone#

DOG INFORMATION	
Name	Breed
Birthday	Gender (M/F)
Colour	Weight
License#	Tattoo
Microchip#	Spayed/neutered?
Who is authorized to pick up?	
What are your dog's favourite activities?	

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MEDICAL HISTORY	
Veterinary clinic	Phone#
Allergy	
Any known medical concerns	
*Please bring a copy of the vaccination record to the assessment appointment. Distemper, parvovirus and rabies vaccines are required. Bordetella vaccine is recommended but not mandatory.	

BEHAVIOURAL HISTORY	
Has your dog been to a doggie daycare before?	Yes / No
Has your dog been to an off-leash dog park before?	Yes / No
Has your dog ever been removed from a dog daycare before? What happened?	
How does your dog react to strangers?	
Does your dog have any fear or aggression toward certain breeds/sizes of dogs?	Yes / No
Is your dog fearful of certain people, gender, clothing, etc.?	Yes / No
Has your dog ever snapped, growled, or bitten another animal or person?	Yes / No
Is your dog reactive on a leash?	Yes / No
Does your dog exhibit any resource guarding behaviour?	Yes / No
Is your dog kennel trained?	Yes / No

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Anything else you would like us to know about your dog?

CONSENT

How did you hear about us?

Name of the person who referred you (if applicable):

Would you like to receive email updates from The Dog Circle? Yes / No

Is it ok if we tag you on Instagram?

Is it ok if we tag your dog on Instagram?

SIGNATURE:

DATE: