



- New Doggy Dude
- Existing Dude's Updated Information
- Additional Doggy Dude

Please read and answer ALL questions. You can use a “?” or NA when applicable.

Guardian/Human's Name: _____

Mailing Address: _____ City/Town _____ State _____ Zip _____

Home Phone #: (____) _____ Work #: (____) _____ Cell #: (____) _____

Email Address: _____ Web Address: _____

Hotel Name: _____ RV or Camp Name _____ Space # _____

Emergency Contact: _____ Relationship: _____

Home Phone #: (____) _____ Work #: (____) _____ Cell #: (____) _____

**An emergency contact is someone who is not traveling with you.

Persons Authorized to Drop-off/Pick-up my dog(s): _____

How did you hear about the Doggy Dude Ranch: Website Drive-By Yellow Pages Email Flyer Direct Mail Special Event
 Newspaper Referral: _____ Other: _____

Does You/Your Doggy Dude have a Face Book page? YES/NO

Can we take photos and use their image on our website and Face Book page? Yes /No

What is your primary reason for bringing your dog(s) to the Doggy Dude Ranch? Loves to play Socialization Work long hours
 Travel Extensively Sports/Rehab Training Visiting Park

FIRST DOGGY DUDE

Doggy Dude's Name: _____ DOB: ____/____/____ Age: _____

Breed: _____ Color: _____ Weight: _____

Sex: Male / Female My Doggy Dude Is Spayed/Neutered: YES/NO

How long have you had your dog? _____ Is your dog a rescue? YES/NO

Disposition with people: _____ With Dogs: _____

Can they go in the kiddie pools and get wet? YES/NO Your dogs favorite game? _____

Feedings (Client Provided):

Brand Name: Dry: _____ Canned: _____ Raw: _____

Morning: Quantity: _____ Special Instructions: _____

Afternoon: Quantity: _____ Special Instructions: _____

Evening: Quantity: _____ Special Instructions: _____

Can your Doggy Dude have treats? YES/NO

MEDICAL INFORMATION:

Veterinarian: _____ Phone #: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Does your dog have any allergies or other medical conditions? YES/NO

Explain: _____

Does your dog have any physical conditions? (Such as a limp) YES/NO

Explain: _____

Are there any restrictions that should be placed on your dog's activities? YES/NO

If yes, what activities/restrictions? _____

Has your dog had diarrhea or vomited in the last 24 hours? YES/NO

Explain: _____

Has your dog been sick in the last two weeks? YES/NO

Explain: _____

Medications: YES/NO (Please list all medications)

Medication: _____ Morning Afternoon Evening Dosage: _____

Medication: _____ Morning Afternoon Evening Dosage: _____

Medication: _____ Morning Afternoon Evening Dosage: _____

CANINE BEHAVIOR QUESTIONS: (Please answer the following questions as accurately as possible)

Is there any PERSON, type of DOG, or SITUATION your dog seems uncomfortable with? YES/NO

Please Describe: _____

Has your dog ever jumped or dug under a fence or barrier to escape? YES/NO

Please Describe: _____

Has your dog ever socialized with a large group of dogs (5+)? YES/NO

If yes, under what conditions? (i.e. daycare, dog park, etc.) _____

Has your dog ever growled at or bitten/nipped another PERSON or DOG? YES/NO

If Yes, what were the circumstances? _____

Can you take a food item away from your dog without him growling or reacting? YES/NO

Will your dog readily share toys with other dogs? YES/NO

Are there any areas on your dog's body where he/she DOES NOT like to be touched by humans? YES/NO

If yes, what areas? _____

Has your dog ever been crate trained? YES/NO

Has your dog ever been left in a place like the DDR? YES/NO

Things you have left for your dog/pet: _____

Anything else you would like us to know about this doggy dude? _____

DOG'S NAME(S) _____

SECOND DOGGY DUDE

Doggy Dude's Name: _____ DOB: ____/____/____ Age: _____

Breed: _____ Color: _____ Weight: _____

Sex: Male / Female My Doggy Dude Is Spayed/Neutered: YES/NO

How long have you had your dog? _____ Is your dog a rescue? YES/NO

Disposition with people: _____ With Dogs: _____

Can your dog get wet? YES/NO What is your dogs favorite game? _____

Feedings (Client Provided):

Brand Name: Dry: _____ Canned: _____ Raw _____

Morning: Quantity: _____ Special Instructions: _____

Afternoon: Quantity: _____ Special Instructions: _____

Evening: Quantity: _____ Special Instructions: _____

Can your Doggy Dude have treats? YES/NO

MEDICAL INFORMATION:

Does your dog have any allergies or other medical conditions? YES/NO

Explain: _____

Does your dog have any physical conditions? (Such as a limp) YES/NO

Explain: _____

Are there any restrictions that should be placed on your dog's activities? YES/NO

If yes, what activities/restrictions? _____

Has your dog had diarrhea or vomited in the last 24 hours? YES/NO

Explain: _____

Has your dog been sick in the last two weeks? YES/NO

Explain: _____

Medications: YES/NO (Please list all medications)

Medication: _____ Morning Afternoon Evening Dosage: _____

Medication: _____ Morning Afternoon Evening Dosage: _____

Medication: _____ Morning Afternoon Evening Dosage: _____

CANINE BEHAVIOR QUESTIONS: (Please answer the following questions as accurately as possible)

Is there any PERSON, type of DOG, or SITUATION your dog seems uncomfortable with? YES/NO

Please Describe: _____

Has your dog ever jumped or dug under a fence or barrier to escape? YES/NO

Please Describe: _____

Has your dog ever socialized with a large group of dogs (5+)? YES/NO

If yes, under what conditions? (i.e. daycare, dog park, etc.) _____

Has your dog ever growled at or bitten/nipped another PERSON or DOG? YES/NO

If Yes, what were the circumstances? _____

Can you take a food item away from your dog without him growling or reacting? YES/NO

Will your dog readily share toys with other dogs? YES/NO

Are there any areas on your dog's body where he/she DOES NOT like to be touched by humans? YES/NO

If yes, what areas? _____

Has your dog ever been crate trained? YES/NO

Has your dog ever been left in a place like the DDR? YES/NO

Is there anything else you would like us to know about this doggy dude? _____

DOG'S NAME(S) _____

I, the undersigned, hereby acknowledge and agree that all the information provided in this Doggy Dude Ranch Boarding Release is complete and accurate to the best of my knowledge. I hereby execute the Agreement for my dog, myself and my heirs, successors, representatives and assigns. I further attest that if I am not the sole owner or representative of the dog subject to this application, that my signature is sufficient to enter into this Agreement for and on behalf of any other owner or representative.

Guardian's Signature _____

Printed Name _____ Date _____

I further acknowledge and agree that I have read, understand and agree to all terms and conditions contained in the Doggy Dude Ranch Policies, Procedures and Releases.

1. **PERSONAL PROPERTY.** I agree that Doggy Dude Ranch shall not be responsible or liable for any lost, stolen or damaged personal property belonging either to me or my dog(s). I also understand and agree that my Doggy Dudes collar may be removed in the play area to prevent injury to any dog.
2. **DOGGY DUDE RANCH FEES.** I agree to pay for all fees and services by cash, check or credit cards at the time I pick up my Doggy Dude after each visit to the DOGGY DUDE RANCH. I further agree to pay the cost of any check or debit charges returned or challenged for any reason
3. **CANCELLATION POLICY.** Available upon request.
4. **REFUNDS.** Assessment would be made on individual basis.
5. **AGGRESSIVE DOGS/FEARFUL DOGS.** We will provide board for any dog that we feel we can care for in a safe and humane manner.
6. **DUTY TO DISCLOSE.** I have disclosed and shall continue to disclose on an ongoing basis, any and all medical or other conditions, including but not limited to personality concerns or behaviors that may affect, limit or prevent my Doggy Dude's ability to participate in play time or otherwise attend the Doggy Dude Ranch, play groups or boarding.
7. **DOGGY DUDE RANCH PARTICIPATION.** I understand participation in play time is at the sole discretion of Team Doggy Dudes and that Doggy Dudes may be separated from others or asked to leave for any reason at DDRs sole discretion. **SAFETY IS OUR NUMBER ONE CONCERN.**
8. **ACCEPTANCE AND ACKNOWLEDGEMENT OF DOGGY DUDES PARTICIPATION RISK. I FULLY UNDERSTAND THAT: (a) THERE ARE INHERENT AND POTENTIAL RISKS INVOLVED WITH INTERACTIONS BETWEEN HUMANS AND DOGS, AS WELL AS BETWEEN DOGS AND OTHER DOGS, WHICH MAY RESULT IN PROPERTY DAMAGE OR BODILY INJURY, INCLUDING BUT NOT LIMITED TO, PERMANENT DISABILITY, SICKNESS OR DEATH TO HUMAN OR DOG; AND (b) THERE MAY BE OTHER RISKS NOT KNOWN TO ME NOR READILY FORESEEABLE AT THIS TIME (COLLECTIVELY, "RISKS"). I FULLY ACCEPT AND ASSUME ALL RESPONSIBILITY FOR ALL RISKS, INCLUDING, WITHOUT LIMITATION, ALL LOSSES, COSTS AND DAMAGES INCURRED AS A RESULT OF MY OR MY DOGGY DUDE'S PARTICIPATION IN THE DDR PLAY OR CARE, INCLUDING ANY VETERINARIAN EXPENSES INCURRED ON BEHALF OF MY DOG. SICKNESS SHALL BE DEFINED AS ANY ILLNESS INCLUDING BUT NOT LIMITED TO BORDETELLA (KENNEL COUGH).**
9. **VETERINARIAN LIABILITY AND CARE.** I agree to allow THE DOGGY DUDE RANCH to obtain medical treatment for my DOGGY DUDE, if, in its sole discretion it appears that, he/she is ill, injured or exhibits any other behavior that would reasonably suggest that my Doggy Dude may need medical treatment. If my Doggy Dude passes away at DDR, we shall follow the owners instructions. **I AGREE THAT I AM FULLY RESPONSIBLE FOR THE COST OF ANY SUCH MEDICAL TREATMENT, AND FOR THE COST OF ANY TRANSPORTATION FOR THE PURPOSES OF SUCH TREATMENT, PROVIDED TO MY DOGGY DUDE.**

Owner/Guardian Signature _____ Date _____

FOR OFFICE USE ONLY – Initials:

Date: _____ Rate: Local _____ Biz _____ Visitor _____ Other _____

Proof of current vaccinations: DA2PP _____ Rabies _____ Bordetella _____ 6 months or 1 year Titer Test Results
No Paper Proof

Favorite dog buddies: _____

Favorite people: _____

Favorite places to stay: _____

Dogs they don't like: _____

WARNING: Digs Climbs Chews fence Open gates Jumps Other: _____

Comments _____

Date: _____ Rate: Local _____ Biz _____ Visitor _____ Other _____

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Comments _____
