



Debbie Dolittle's



Dog Daycare Questionnaire

CLIENT INFORMATION:

DATE:

CLIENT NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

EMAIL ADDRESS: _____ **PET:**

PET NAME: _____ PET BREED: _____

NEUTERED/SPAYED: _____ SEX: _____ VACCINATIONS UP TO DATE: _____

LAST KENNEL COUGH IMMUNISATION DATE _____

ANY CURRENT HEALTH CONCERNS: _____

ARRIVAL TIME: _____

COLLECTION TIME: _____

OR

PICK UP TIME _____ (additional cost to be agreed)

DROP OFF TIME _____ (additional cost to be agreed)



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We like all the animals to enjoy playing with each other where possible, therefore please briefly describe your dog's personality below:

- FRIENDLY **NOTES:** _____
- NERVOUS _____
- TIMID _____
- PLAYFUL _____
- AGGRESSIVE _____

SERVICE AGREEMENT

All reasonable care will be given in watching your pet(s). However, due to the unpredictability of animals, we do not accept responsibility or liability for any mishaps of any extraordinary or usual nature which can include but not limited to: biting, furniture damage, medical illness, accidental death, etc. or any complications administering medications to the pet. Nor can we be liable for any injury, disappearance, or death for the pet described in this agreement and any 3rd party or otherwise.

I give permission to DEBBIE DOLITTLE'S to care for my pet(s). I understand payment is due in accordance to the agreed payment plan. I understand my pet **must** be picked up by 5:00 p.m. to avoid overtime charges unless prior approval has been given. Overtime charges are 10AED per hour.

By signing below I have reviewed and understood with the terms and conditions of this agreement.

I certify my dog is not aggressive and plays well with other dogs: [X] _____ I

certify my dog is up to date on vaccinations: [X] _____

SIGNATURE: _____ DATE: _____/_____/_____

PRINT NAME: _____