

WAGVILLE APPLICATION

(Please fill out one application for each dog applying to attend WagVille. You need not repeat your own personal information for each dog.)

BASIC INFO

 Your Name(s): (Please list all owners)

 Name of Dog:

 Dog's Breed:
 M or F:

· ____ · ___ · ___ · ___ ·

Dog's Birthday (please estimate if not sure): _____

Housebroken (Y or N)

Spayed or Neutered? (Yes or No)_____

• We only allow unfixed dogs to attend daycare or board at WagVille if the dogs are 6 months or under. We apologize for any inconvenience.

On Some Sort of Flea Preventative? (Y or N)_____

• Dogs must be current on some sort of flea preventative (for example, frontline or advantage applied every four weeks) in order to attend WagVille. We rely on you to keep this up in order to protect all our dogs. Again, we apologize for any inconvenience, but even if your dog normally does not contract fleas at home, in an environment where groups of dogs are together the risk is much greater, and this is the best way we've found to protect our dogs. We encourage the use of non-toxic, holistic flea sprays.

We require that you have an up-to-date vaccination or titer test showing antibodies to the following diseases: Distemper, Parvovirus, Bordetella, and Rabies. The city of LA also requires us to keep on hand certain paperwork.

Therefore, please bring copies of each of the following to your evaluation:

- Receipt or other proof from vet showing Distemper, Parvo and Bordetella vaccinations were given, and/or titer tests showing antibodies to each.
- Rabies vaccination certificate
- Sterility certificate (spay or neuter)
- Current license
- Complete medical records for any ongoing medical issues

Your Home Address: Street:		
City/State/Zip:		
Phones: Home:	Work:	
Cell for:		
Cell for:		



Wagyine LA's Holistic Dog Day Care
Email for:
Email for:
Emergency Contact Name:
Address:
Phones: Work: Home: Cell:
Email:
Veterinarian: Phone:
Address:
Email:
Are you interested in daycare, boarding or both?
Will your dog be coming in soon for a boarding stay? If so, when?
BEHAVIOR AND SOCIALIZATION
Is your dog nervous: Around new people? $\Box Y \Box N$ Around new dogs? $\Box Y \Box N$ In new situations? $\Box Y \Box N$ Around large groups of dogs? $\Box Y \Box N$
How long has your dog been living with you?
Where/how did your dog start living with you? (Please provide any relevant background information, such as history of abuse or lack of socialization before entering into your care)
Describe dog's normal socialization with people and with dogs (eg. Goes to dog park once a week; Always alone at home; etc.). If they go to the dogpark, please tell us how they act at the dogpark:

Has your dog ever been to a daycare or boarding facility of any kind before? (if so, describe, including whether the facility/ies was/were cage free)_____



Has your dog ever been around a group of more than 2 dogs? If so, approximately how many and what was/were the situation(s)?______

Please check any of the following that apply to your dog:					
 Very high energy (extremely active) Puppy energy (spurts of extremelyhigh energy followed by long naps) Low energy (likes to lounge a lot) 					
□ Loves dogs □ Likes dogs □ Doesn't care about other dogs					
Your dog's favorite activity/ies:					
Has your dog ever bitten a person? \Box Y \Box N If yes, please describe the situation(s) and the severity of the bite(s):					
Has your dog ever bitten a dog? \Box Y \Box N If yes, please describe the situation(s) and the severity of the bite(s):					
Behavioral issues your dog has had in the past (including any incidents of growling at or fighting with any dog or person), when those issues occurred, and what has been done to remedy them					
Behavioral issues your dog is experiencing presently					



Does your dog get along with: Small dogs $\Box Y \Box N$; Large dogs $\Box Y \Box N$

Is your dog particularly scared of any type of human, dog, or event (eg: tall men, balloons, etc.) and how scared is your dog of each of these things (does he or she walk away, bark, shake and hide, etc.)? *Please particularly make sure to tell us if your dog is scared of thunder or fireworks and his or her reaction to them, since these are things that do definitely occur every year.*

Dog's favorite toys (eg: plush squeaky; bones, ropes)

Dog's favorite place to be petted (eg: loves neck, bottom or tummy scratched)

In order to help us get to know your dog better, please tell us: What are your favorite things about your dog?

MEDICAL

Dog's Important Medical Conditions (any chronic allergies or other medical problems of which we should be aware):______

Please list all medications (allopathic or homeopathic) which your dog is currently taking, and what your dog is taking them for:______

Are there any places your dog does not like to be touched, during grooming or otherwise?



Please list each (if any) lump, bump, scar, hotspot, cut your dog has on his or her body, and please circle the location on the diagram below:

TRAINING

Commands your dog understands (sit, stay, down, off or no jump, come, etc.?):

Types of training, formal or informal, your dog has experienced:_____

FEEDING

og's regular food:	
Brand or type	
Amount at each feeding	
Time and frequency of feedings	
og's treats:	
Brands or types	
Amounts	
Time and frequency of feedings	



Does your dog have any allergies, either to any foods or to any other substances?

If dog has a sibling attending WagVille simultaneously, can dogs be fed together?_____

Does your dog eat easily/quickly?_____

Does your dog eat with an elevated bowl (as opposed to a bowl on the floor)? Y N

Often, dogs who are in a new place away from home are reluctant to eat. Can we add some of our wet dog food to entice your dog to eat? We usually use something from our store, like the Prairie Nature's Variety Canned._____

If you would prefer we not add our canned food to your dog's food, is there anything we may add (cheese, for example)?______

Does your dog have a strong or weak stomach (can he or she vary his or her diet easily, or does he or she get diahrea or vomit easily when fed a food or treat he or she doesn't usually eat)?______

SLEEPING

Describe dog's sleeping schedule (time usually goes to bed, awakes)_____



EXPECTATIONS

What are the main reasons you are bringing your dog to WagVille, and what do you hope your dog will get out of the experience?

REFERRALS

Where did you hear about WagVille?						
	Google	□ Yelp	Citysearch	🛛 Yahoo	Inside Pasadena	
	Other onlin	e/internet so	ource:		□ Betterworks program	
	Already G	rooming clie	ent 🛛 Already	Training clien	t	
	Friend:			_ D V	an 🛛 Drove by	
	Other					

EMERGENCY CREDIT CARD

Please provide us with the following credit card information. Your card will not be

charged for any purpose other than (1) you asking for some of your bill to be placed

on the card or (2) emergency care for your dog.

- Credit Card Type: ______
- Credit Card Number: ______
- Credit Card Expiration Date: ______
- Credit Card CCV Code ______

Thank you so much for taking the time to tell us about your dog and yourself!!

To complete this Application, please read, sign and date the *WagVille Client Release* which comprises the final part of the Application.. Thank you!



WAGVILLE CLIENT RELEASE

I understand that, despite WagVille Inc. (WagVille)'s efforts to maintain the safety of every dog and human at WagVille, there are certain risks involved in doggie day care and boarding. These risks include but are not limited to injuries such as bites or scratches to my dog or me, getting knocked down, my dog getting injured during play or an altercation with another dog and my dog contracting fleas, kennel cough or some other parasite or illness; and that injuries can happen in WagVille's play area, lobby, parking lot, or anywhere else in or around WagVille.

I voluntarily accept these risks, and release WagVille and its owners, directors, officers, employees, independent contractors and assigns from any and all claims for or arising out of injury or damage of any kind or nature, to me, anyone with me and to my dog in any way related to or resulting from my use of WagVille services or my association with WagVille. This acceptance of risk and release includes but is not limited to claims of injuries or loss to my dog, myself, anyone who picks up or drops off my dog, or to any property that belongs to me.

If my dog becomes injured or ill while at WagVille I accept responsibility for veterinary bills and all other costs incurred for care or otherwise due to the injury or illness. I agree that WagVille may use my credit card number, provided in my WagVille Application ("Card"), to pay for all such veterinary and other costs. I understand and agree that this release applies to future unknown or unsuspected claims, and hereby waive Section 1542 of the California Civil Code and any similar law. Section 1542 reads as follows:

"A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM OR HER MUST HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR."

I consent to WagVille obtaining medical attention for my dog from any qualified veterinarian and transporting my dog to and from that veterinarian when WagVille deems such medical care may benefit my dog's health. I grant WagVille or its employees or agents full power of decision involving the medical treatment of my dog, and authorize the use of my Card for such purpose. This release also applies to any claims for injuries or damages related to such medical care or transport.

I consent to WagVille taking my dog for one or more walks when WagVille deems such walks are important for my dog's health. This release also applies to any claims for injuries or damages related to such walks.

If I choose to sign my dog up for a field trip, I agree that this release also applies to any claims or injuries or damages related to such field trips.

If I choose to sign my dog up for the WagVille shuttle service, I agree that this release also applies to any claims or injuries or damages related to such shuttle service.

This release grants consent but does not impose any obligation on WagVille to take any particular action, whether described in this release or not.

I agree to be responsible for all damage my dog causes to property of WagVille, and/or dogs and/or property of others while at WagVille or being transported to or from WagVille or being walked or played with outside of WagVille. I authorize WagVille to use my Card to pay for that damage.

I represent and warrant that my dog is in good health and has not had any communicable illness of any kind for one week prior to attending WagVille. I further represent that each time I bring my dog to WagVille, by doing so I am again representing that my dog is in good health and has not had any communicable illness of any kind for one week prior to such attendance.

I represent and warrant that my dog is currently protected by a flea care preventative (holistic or nonholistic) and that my dog will be protected by this preventative throughout each and every day my dog attends WagVille, each time I bring my dog to WagVille. This representation is for the benefit not only of WagVille but also the other dogs at WagVille and their owners.

I represent and warrant that my dog does not have a history of aggressive behavior towards other dogs or humans.

I represent and warrant that I am at least eighteen (18) years of age and that I have the full, complete and unrestricted right and authority to enter into this release.

Signature: ____

Print Name: _____

_____ Date: _____

Please call us at 323-222-4442 to set up an evaluation so that your dog can attend boarding or

daycare if you haven't already done so.



FOR OFFICE USE ONLY

Date of Evaluation:					
Evaluator:					
Side of Playground: (S or L):					
Accepted (Y or N):					
Special notes & precautions:					