

ACADEMY OF CANINE BEHAVIOR

File # _____

Dog Check In Form

Owner 1: _____ Phone #: _____ (Landline / Cell)

Owner 2: _____ Phone #: _____ (Landline / Cell)

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

Home Phone: _____

Email 1: _____ Email 2: _____

Emergency Contact 1: _____ Phone: _____

Relation to Owner: _____

Emergency Contact 2: _____ Phone: _____

Relation to Owner: _____

Are the above emergency contacts prepared and able to make any decisions on your behalf? Yes No

Dog's Name: _____ Breed: _____ Color: _____

Birthdate: _____ Sex: _____ Is your dog spayed/neutered? _____

Does your dog have any medical conditions or allergies? _____

Please List: _____

Problems: ___ Chews Bedding ___ Runs Away ___ Shy ___ Climbs Fences
 ___ People Aggressive ___ Dog Aggressive ___ Barks ___ Stool Eater ___ Food Aggressive

Age dog obtained: _____ From(Shelter/Breeder/Other): _____

Training to date: _____

Is there anything we need to know about your dog? _____

Veterinarian Clinic: _____ Phone: _____

I have read the bark collar awareness form:

Owner -or- Agent _____ Date: _____

Is your dog an avid barker at home? Yes ___ No ___

Has your dog used a bark collar before? Yes ___ No ___

Does your dog have any heart issues? Yes ___ No ___

I have read the health awareness form:

Owner -or- Agent _____ Date: _____

Continued on back



Illness or Injury Treatment Preferences

In case of illness or injury and we are unable to reach the contact person(s), what course of action would you like us to take? **If under duress and we are unable to reach any contacts within a reasonable amount of time, we will use our best judgement.**

Memorial Preferences: *For Infirm (Elderly or Medically Vulnerable)*

The Academy is privileged to have a large and knowledgeable staff that can see to our client's elderly cats and dogs as well as those with most medical needs. Although it's hard to imagine, if your pet should happen to pass away while on site, we would like to know what you would prefer we do, given we cannot get in touch with you until you have returned home.

- Transport to vet: To hold remains for owner pick up
 Private cremation Memorial items?
 Communal cremation
 Non-return of remains

We (the Academy of Canine Behavior Inc.) agree to exercise due and reasonable care of your animal, and to provide your animal with safe quarters and to properly feed and care for your animal. All animals are boarded and/or trained or otherwise handled or cared for by us without liability on our part for loss or damage from disease, death, running away, theft, fire, injury to persons, other dogs, or property by said animal, or other unavoidable causes, due diligence and care having been exercised. If the animal's health demands quick action, The Academy of Canine Behavior Inc. is authorized to have a veterinarian look at and treat the animal for the cause and effect. Such expenses, being reasonable in amount, shall be paid promptly by the owner. It is also understood that the owner is NOT responsible for injuries caused by the animal while in the care of The Academy, provided that all facts of known biting or aggression are disclosed by the owners. Occasionally, photographs or video footage may be taken of animals that are staying here at The Academy. We give The Academy our permission for any resulting photographs or video of our animal to be used for advertising or educational material, understanding that the resulting photographs or videos are the sole property of The Academy of Canine Behavior's. Any legal expenses incurred in defense or enforcement of this contract shall be the total responsibility of the owner of the animal. I hereby acknowledge that I have read all of the above and agree as owner or agent of the owner to the forgoing. I also understand and agree that all outstanding charges are due and payable upon completion of services.

SIGNED: _____

(Owner / Agent)

DATE SIGNED: _____