

**Brooke’s Barks & Recreation**

Off-Leash Play Enrollment Application

Please fill out separate applications for each household dog.

**---------------------------------------------------------Owner Information---------------------------------------------------------------**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (Cell/Home) (Text? Y/N):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (Cell/Home) (Text? Y/N):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**-----------------------------------------------------Emergency Contact Information------------------------------------------------------------**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (Cell/Home) (Text? Y/N):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (Cell/Home) (Text? Y/N):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**------------------------------------------------------------Dog Information---------------------------------------------------------------**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sex:\_\_\_\_ Intact: (Y/N)

Birthday/Adoption Day(Circle One):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Weight:\_\_\_\_\_\_\_\_\_ Vet Clinic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vet Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vet Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vet Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vet Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**-----------------------------------------------------------Pet Personality Profile---------------------------------------------------------**

*There are no “wrong” answers; your reply to any question is not necessarily grounds for immediate rejection from Off-leash play. Please fill out the application to the best of your knowledge.*

**Background Information**

* How and when did your pup join your family?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What age was he/she when he joined your family?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Did he/she come altered or did you have him/her neutered/spayed?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* At what age was the alteration done?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

--------------------------------------------------------------Internal use only-----------------------------------------------------------------

Vaccination Due Date: RABIES\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DHLPP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BORDETELLA\_\_\_\_\_\_\_\_\_\_\_\_

Application Fee \_\_\_\_\_\_\_\_

Evaluation A: Date:\_\_\_\_\_\_\_\_\_\_\_ Score:\_\_\_\_\_\_\_\_\_ Employee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Evaluation B: Date:\_\_\_\_\_\_\_\_\_\_\_ Score:\_\_\_\_\_\_\_\_\_ Employee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

--------------------------------------------------------------Internal use only---------------------------------------------------------------------

* If adopted, from whom and where did the adoption take place?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* If purchased, from whom and where did the purchase take place?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Why are you interested in Off-Leash Play?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How did you hear about BB&R?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Health & Grooming**

* What flea treatment product do you use?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does your pup suffer from allergies? (Y/N) If yes, what type and treatment provided:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any food restrictions or sensitivities?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any joint related issues or surgeries (Hip dysplasia, Osteoarthritis, TPLO,TTA, etc.):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any restrictions on movement?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any past or current issues with ear infections?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does he/she like being brushed?\_\_\_\_\_\_\_\_\_\_\_\_\_ Nails clipped?\_\_\_\_\_\_\_\_\_\_\_ Feet touched?\_\_\_\_\_\_\_\_\_\_
* How do they react to each situation above?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Where is his/her favorite petting spot(s)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Where does he/she get groomed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any additional health or grooming concerns?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Behavioral Information**

* How would you describe your dog’s personality?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What is your dog’s favorite activity?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How is he/she around children?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How many children and what age groups has he/she met?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Are there any other animals in the house?: Y/N If yes, please list each species, gender, age, and how they interact with one another:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How does he/she interact with neighborhood dogs?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* How is he/she with visitors?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does he/she growl/bark out the window at passing people/objects/cars/animals?: Y/N If yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Is he/she afraid of strange people?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Is he/she afraid of strange dogs?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Is there anything he/she automatically dislikes or is fearful of?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* How does he/she react to puppies?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Has he/she ever: Growled at a person Y/N Growled at another dog Y/N
* If yes to either, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Has he/she ever: Snapped at a person Y/N Snapped at a dog Y/N

If yes to either, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Has he/she ever: Bitten a person Y/N Bitten another dog Y/N

If yes to either, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* If your dog has bitten, how severe was the bite?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Does he/she have any problems in the following areas: Nipping/Grabbing:\_\_\_\_\_\_\_\_\_\_ House training:\_\_\_\_\_ Barking:\_\_\_\_\_\_\_\_ Digging:\_\_\_\_\_\_\_\_\_ Jumping:\_\_\_\_\_\_\_\_ Other:\_\_\_\_\_\_\_\_\_\_\_ If so, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Has he/she been in an off-leash play setting before? (This includes play groups, dog parks, or group play at home): Y/N If yes, where and when?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does he/she do?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Any toys or treats involved?:\_\_\_\_\_\_\_\_\_\_\_

* Has he/she been kicked out of off-leash play groups: Y/N If yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Does he/she play well with others?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Has he/she shared their food or toys willingly with humans? Y/N If no, explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Has he/she shared their food or toys willingly with dogs? Y/N If no, explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* In the past year, has he/she been prescribed any behavioral or anti-anxiety meds (such as: Alprazolam, Clomipramine, Gabapentin, Fluoxetine, Trazadone, etc.)? Please list each medication, reason prescribed, dose, and length of treatment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Any additional behavioral comments or concerns?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Training Information**

* Has he/she been through any **formal** obedience training?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Where and when did the training occur?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What obedience commands does he/she know with verbal only prompts?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* What obedience commands does he/she know with 1-2 prompts?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What tricks does he/she know?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does he/she wear any gear when training (Gentle Leaders, Body Harness, Slip Lead, Correctional Collar)?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What treats does he/she like for training?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What does he/she need to improve on?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Any known behavioral issues?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Has he/she gained any awards or certificates for behavior or training (AKC, CGC, Therapy, etc.)?:\_\_\_\_

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* Any additional training comments or concerns:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**--------------------------------------------Additional Comment Section-----------------------------------------------------**

*Please use this section to provide us with any additional comments, concerns, or feel free to tell us a bit more about your pup.*

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Brooke’s Barks & Recreation

Daycare General Information and Policies

The purpose of Brooke’s Barks & Recreation’s Dog Daycare Center is to provide a safe, fun, and stimulating social environment for dogs. To ensure the safety and health of your pup and our other guests, we require all clients to comply with the following rules and regulations:

**Age:** All dogs must be at least 6 months of age or older. We do accept younger clients as long as they are a current participant in our pup-scout program, have submitted an application, and go through our evaluation process.

**Sex & Breed:** We accept all genders and breeds, with some restrictions. All participants in our off-leash play groups must be neutered or spayed. There is no breed ban at Brooke’s Barks & Recreation. All off-leash applicants are screened based on behavior. Ovary sparing spays (OSS) are acceptable, however we do request that females remain at home during the active uterine shedding phase. Clients with OSS will not be charged any No call/No Show (NC/NS) fees in relation to active uterine shedding, provided we were made aware of the estimated time frame the cycle would occur in advance. Males with prosthetic enhancements will not be accepted.

**Vaccinations:** All clients must have up-to-date vaccinations. Owners must submit written proof of 3 vaccines: DHLPP, Rabies (4+months and older), and Bordetella (6 month booster required for off-leash play). Proof of vaccination must come from your vet’s office. Phone verification via vet office is accepted. Phone # 815.616.5561 Email submission via vet office is accepted. Email: [barksandrecfreeport@gmail.com](about:blank)

**Health:** All clients must be in good health. Owners will certify their dog(s) are in good health and have not been ill with a communicable condition in the last 15 days. Upon admission, all dogs must be free from any condition which could potentially jeopardize other guests. Dogs that have been ill with a communicable condition in the last 15 days will require veterinarian certification of health to be admitted or readmitted.

**Behavior:** All off-leash play clients must be non-aggressive and not food or toy protective. Owners will certify their dogs have not harmed or shown any aggressive or threatening behavior towards any person or any other dog(s). Please remember that your pet will be spending time with other pets and BB&R employees; the health and safety of everyone is our main concern.

**Application and Evaluation:**  All dogs must have a complete, up-to-date, and approved application on file, as well as passing an enrollment evaluation. You will need to complete a new application with an enrollment evaluation after 6 months of continuous absence.

**Fees:** Fees are based on a tier and level system. Tier 1 (Bronze) is valid for 3 months from the date of purchase. Tier 2 (Silver) and Tier 3 (Gold) are valid for 6 months from date of purchase. Level 1 is 2x a week. Level 2 is 3x a week. Attendance past 3x a week is not generally recommended for off-leash play and would need approval from management. This includes attendance at other daycare facilities. Daily Pass rate is $25/day. Additional dogs are an extra $15.00 per day per dog. Multiple dog households may share packages. Only 1 dog per household per day allowed unless the additional dog fee of $15.00 per additional dog is paid. The pricing structure is as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Tier | Level 1 (2x per week) | | Level 2 (3x per week) | |
| Bronze : 1 Month | $192.00 | 8 visits | $276.00 | 12 visits |
|  | ($24.00/day) | + 1 Free Enrichment | ($23.00/day) | +2 Free Enrichments |
| Silver : 3 Month | $528.00 | 24 visits | $756.00 | 36 visits |
|  | ($22.00/day) | +3 Free Enrichments | ($21.00/day) | +4 Free Enrichments |
| Gold : 6 Month | $960.00 | 48 visits | $1,368.00 | 72 visits |
|  | ($20.00/day) | + 5 Free Enrichments | ($19.00/day) | +6 Free Enrichments |

**Enrichment Activities:** These optional enrichment activities will be offered daily. They are an additional $5.00 per day unless offered as a bonus through our packages. They will consist of small groups of our off-leash play pups with a member of staff engaging in brain activities. These activities will vary from day to day. A monthly calendar of activities will be sent via email. Participation is not required but encouraged to help stimulate your pup and provide a secondary outlet for energy release.

**Days and Hours:** Hours are Monday through Friday 7am-6pm. Day care drop offs are between 7am-9am. Early bird drop offs are available as early as 6am, with prior notice. Any drop off made after 9:00am will be charged a late fee. Day care pick-ups are between 4pm & 6pm. Brooke’s Barks and Recreation is not an overnight facility. Staff goes off duty at 6pm. There is a $1.00 per minute charge for any pet left after 6:00pm.

**Reservations:** Reservations are required. Clients who No Call/No Show (NC/NS) or who provide less than 24 hour’s notice will be charged full fees.

**Owner Agreement**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby certify that my dog:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is in good health, is fully vaccinated, including a six month *Bordetella* booster, and has not been ill with any communicable condition in the last 15 days.

I have read and understand the following.

1. I understand that I am solely responsible for any harm or damage caused by my dog while my dog is/are attending Brooke’s Barks & Recreations Off-leash Play group.
2. I further understand and agree that in admitting my dog to Off-Leash play, BB&R staff have relied on my representation that my dog is in good health and has/have not harmed nor shown any aggressive or threatening behavior towards any person or any other dog.
3. I further understand and agree that Brooke’s Barks & Recreations and their staff and volunteers will not be liable for any problems that develop, provided reasonable care and precautions are followed, and I hereby release them of any liability of any kind whatsoever arising from my dog’s attendance and participation at BB&R.
4. I further understand and agree that dogs can sometimes receive minor cuts and scratches at daycare and any problems that develop with my dog will be treated as deemed best by staff and volunteers of Brooke’s Barks & Recreation, at their sole discretion, and that I assume full financial responsibility for any and all expenses involved.

I certify that I have read and understood the policies of Brooke’s Barks & Recreation as set forth on the preceding pages and that I have read and understood the conditions, and statements of this agreement.

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_