

Really Special Animals Doggy Daycare & Training

**REALLY SPECIAL ANIMALS LLC.**

**PET CARE AGREEMENT**

How Did You Hear About Us? \_\_\_\_\_

Owner #1 Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Owner #2 Name: \_\_\_\_\_

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

Address (if different from above): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

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We will ONLY release your dog to the following individuals:

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Anyone not listed must verify by stating your security word listed here: \_\_\_\_\_

Dog's Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Spayed/Neutered: Y/N Sex: M/F Weight: \_\_\_\_\_

Color: \_\_\_\_\_ DOB: \_\_\_\_\_

VETERINARY INFORMATION

Veterinarian's Name/Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

PHYSICAL AND MEDICAL CONDITIONS

Past injuries, sensitivities, and/or surgeries:

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Allergies: \_\_\_\_\_

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Medications: \_\_\_\_\_

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FEEDING INSTRUCTIONS AND DIRECTIONS (for boarding and/or emergency purposes, please fill out COMPLETELY)

Brand of food: \_\_\_\_\_

Amount: \_\_\_\_\_

Frequency: \_\_\_\_\_

Supplements/vitamins: \_\_\_\_\_

Medications: \_\_\_\_\_

\_\_\_\_\_

Any additional comments or instructions:

\_\_\_\_\_  
\_\_\_\_\_

Has your dog been ill in the last 30 days? Y/N

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Is your dog displaying any unusual symptoms such as coughing, sneezing, upset stomach, eye or nose discharge, loose stool, diarrhea or vomiting? Y/N

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Are you able to easily and freely take food, water, high value bones and/or toys away from your dog without growling or snapping? Y/N

If no, please explain:

\_\_\_\_\_  
\_\_\_\_\_

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Has your dog ever attempted to snap at any person for any reason? Y/N

If yes, please explain:

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Has your dog ever successfully bruised or broken skin on any person for any reason? Y?  
N

If yes, please explain:

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Has your dog ever been involved in a negative altercation with another dog? Y/N

If yes, please explain:

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Has your dog ever caused or received any type of Veterinary medical attention due to such an altercation? Y/N

If yes, please explain:

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**No Shots, No Docs, No Service! Really Special Animals LLC. will not board, train or provide Daycare for your dog without updated vaccination documentation. So please provide vaccination documentation or Titer results below or email them to rsadogtraining@gmail.com**

Please list the current expiration dates for the following vaccinations:

Rabies: \_\_\_\_\_

DHLPP: \_\_\_\_\_

Bordetella: \_\_\_\_\_

# Really Special Animals Doggy Daycare & Training

## OTHER INFORMATION

Where did you get your dog and at what age?

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Tell us something funny or memorable about your dog:

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What groomer do you use?

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Any unique or identifying marks on your dog's body?

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