



**DORSET
PAWS &
SNORES**

Boarding, Daycare & Home Sitting Registration Form

Owner Information

Full Name:

Phone:

Email:

Address:

Emergency Contact (if different from above)

Name:

Phone:

Email:

Address:

Dog Information

Name:

Breed:

Age: ☐ Male ☐ Female

Weight (kg):

Spayed/Neutered ☐ Yes ☐ No

Health & Veterinary Information

Vet Name & Address:

Phone:

Microchip No.

Vaccinations (dates):

Kennel Cough (dates):

Date of last flea treatment:

Date of last worming treatment:

☐ I confirm my dog is up to date on required vaccines
(please provide vaccination record).

Known Medical Conditions/Allergies:

Medications (name/dosage/schedule):

Insurance Company:

Policy number:

Phone:

Daily Routine
Feeding instructions (amount, times):
Is your dog possessive over food/toys:
Exercise needs (walks, playtime):
Usual daily routine:
Bedtime/overnight routine:
Special instructions (commands, fears, favourite toys, etc.):

Home Access & Safety (Dog Sitting Only)
Key/entry instructions:
Alarm/security code (if applicable):
Areas of home that dog is not allowed:
Household instructions (bin day, mail, watering plants, etc.):
Emergency plan if home issue arises (power outage, flooding, etc.):

Behaviour & Walking Details			
Is your dog friendly with other dogs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Is your dog friendly with children	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Has your dog ever shown aggression to people	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has your dog ever shown aggression to dogs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, please explain:			
How does your dog behave on a lead:			
Does your dog pull	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Preferred walk duration:	<input type="checkbox"/> 30 min	<input type="checkbox"/> 60 min	
Walk frequency:			

Recall Instructions				
Does your dog come when called	<input type="checkbox"/> Always	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Rarely	<input type="checkbox"/> Never
Recall words/signals used:				
Additional recall notes (treats, whistle, special cues):				
Special instructions (routes, commands, off-lead rules, etc.):				
Allowed treats	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Any other info**Owner Agreement**

- ☐ I understand that while every effort will be made to ensure my dog's safety and well-being, dog sitting & boarding is at my own risk.
- ☐ I authorize emergency veterinary care if necessary, with costs to be covered by me.
- ☐ I confirm my dog is OK to travel in your car.
- ☐ Solo boarding is needed (POA).
- ☐ I give consent for photos to be shared on facebook business page and website.
- ☐ I authorise my dog to be walked outside of the home environment.
- ☐ I confirm my dog can be off lead.
- ☐ I confirm my dog can be walked with other dogs not from the same household.
- ☐ I confirm my dog can be boarded with other dogs not from the same household.
- ☐ I confirm my dogs can board together in the same room.
- ☐ I confirm all information provided is accurate.

Signature:

Date: