

# Thomasville Pet Resort, Daycare & Spa

## Personality Profile

### General Information:

Owner's Last Name \_\_\_\_\_

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

Dog's Breed \_\_\_\_\_ Sex \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

Is Your Dog Spayed/Neutered \_\_\_\_\_ If yes, when was this done \_\_\_\_\_

Does Your Dog Like Children? \_\_\_\_\_ How Does Your Dog Behave around

Children? \_\_\_\_\_

Do You Have Any Other Pets? If So, Please List Type, Sex and Age of Each

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How Does Your Dog Get Along With Them? \_\_\_\_\_

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

### Health/Grooming:

Is Your Dog Being Treated For Fleas? \_\_\_\_\_ What Product Do You Use? \_\_\_\_\_

When Was Last Treatment Given? \_\_\_\_\_

Does Your Dog Have Any Allergies? \_\_\_\_\_ If Yes, Explain \_\_\_\_\_

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Does Your Dog Have Hip Dysplasia? \_\_\_\_\_ If Yes, What Restrictions Need To Be Placed On

Your Dog's Activities or Movements? \_\_\_\_\_

Does Your Dog Like To Be Brushed? \_\_\_\_\_ Any Sensitive Areas? \_\_\_\_\_

Where Are Your Dog's Favorite Petting Spots? \_\_\_\_\_

### Behavior:

Does Your Dog Act Afraid Of Any Specific Items or Noises? \_\_\_\_\_ If Yes, Please Explain

How Does Your Dog React To Strangers Coming Into Your Home Or Yard? \_\_\_\_\_

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Are There Any Kinds Of People That Your Dog Automatically Fears Or Dislikes? \_\_\_\_\_

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Has Your Dog Ever Bitten Someone? \_\_\_\_\_ If Yes, What Were The Circumstances? \_\_\_\_\_

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Does Your Dog Have Problems In Any Of The Following Areas? (If Yes Please Explain)

House training \_\_\_\_\_

Barking \_\_\_\_\_

Digging \_\_\_\_\_

Jumping \_\_\_\_\_

Fence Climbing \_\_\_\_\_

Other \_\_\_\_\_

Has Your Dog Ever Shared His/Her Toys With Other Animals? \_\_\_\_\_

Has Your Dog Ever Growled Or Snapped At Anyone Who Has Taken His/Her Food Or Toys Away From Him/Her? \_\_\_\_\_ If Yes What Were The Circumstances? \_\_\_\_\_

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Does Your Dog Play With Any Toys? \_\_\_\_\_ If Yes What Kind \_\_\_\_\_

Does Your Dog Play With Other Dogs? \_\_\_\_\_

What Commands Does Your Dog Know? \_\_\_\_\_

Does Your Dog Have A Bathroom Command? If So, What Is It? \_\_\_\_\_

Rate Your Dog's Energy Level "1" Being Very Mellow and "10" Being High

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Does Your Dog Show Any Destructive Behaviors When You Are Not At Home? \_\_\_\_\_

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Any Other Comments About Your Dog Which You Might Feel Be Helpful? \_\_\_\_\_

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Water: Is Playing In The Baby Pool Or Getting Wet A Problem For You Or Your Dog? \_\_\_\_\_

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## Statement Of Authorization

I/We \_\_\_\_\_ by signing this  
“Statement of Authorization”, are authorizing my/our Veterinarian to provide any information  
necessary for proper care of: \_\_\_\_\_  
in my/our absence.

Signed: \_\_\_\_\_

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

Date: \_\_\_\_\_

# Thomasville Pet Resort, Daycare & Spa

## Owner Agreement

I, \_\_\_\_\_, hereby certify that my dog(s) \_\_\_\_\_ is/are in good health and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) have not harmed or shown aggressive or threatening behavior towards any person or any other dog. I have read and understood the following:

- \_\_\_\_\_ 1. I understand that my dog will be playing and intermingling with other dogs throughout his/her stay at Thomasville Daycare.
- \_\_\_\_\_ 2. I understand that I am solely responsible for any harm or damage caused by my dog(s) to persons or property of the Owners, employees, licensees, invitees of TDC or any other pets in daycare or visiting TDC while my dog(s) is/are attending Thomasville Day Care.
- \_\_\_\_\_ 3. I further understand and agree that in admitting my dog(s) to the daycare, TDC staff have relied on my representation that my dog(s) is/are in good health and have not shown aggressive or threatening behavior towards any person or any other dog.
- \_\_\_\_\_ 4. I further understand and agree that Thomasville Day Care and their staff and volunteers, will not be liable for any problems which develop, provided reasonable care and precautions are followed, and I hereby release and discharge them of any and all damages, liability and/or causes of action of any kind of accident, damage or injury whatsoever arising from my dog(s) attendance and participation at the camp,
- \_\_\_\_\_ 5. I further understand, consent and agree that any problem or injury that develops with my dog(s) while under the control of Thomasville Daycare will be treated by Thomasville Veterinary Hospital unless prior arrangements have been made. I agree to assume full financial responsibility for any and all expenses involved in such treatment.
- \_\_\_\_\_ 6. I recognize that there are inherent risks of illness or injury when dealing with animals. Such risks include, but are not limited to, problems resulting from rough play and canine cough (doggie colds)
- \_\_\_\_\_ 7. \* I have initialed each statement above to acknowledge my understanding and acceptance.

I certify that I have read, understood and agree with the policies of the Daycare as set forth on the preceding pages and that I have read, understood and agree with the conditions and statements of this agreement.

Signature of Owner \_\_\_\_\_  
Name of Owner \_\_\_\_\_

# Thomasville Pet Resort, Daycare & Spa

## Emergency Contact Information

### Owner Information:

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

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

E-Mail: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

### Emergency Contact:

Name \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

### Pet Information:

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

Breed: \_\_\_\_\_ Color Description: \_\_\_\_\_

Sex: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Weight: \_\_\_\_\_

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

Breed: \_\_\_\_\_ Color Description: \_\_\_\_\_

Sex: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Weight: \_\_\_\_\_

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

Breed: \_\_\_\_\_ Color Description: \_\_\_\_\_

Sex: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Weight: \_\_\_\_\_

### Veterinarian:

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

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