



3538 GARRISON GATE SW  
CALGARY, AB T2T 6N1  
403.242.3641

[urbandogs2023@outlook.com](mailto:urbandogs2023@outlook.com)

**URBAN DOG  
SMALL DOG DAY CARE APPLICATION**

PLEASE FILL OUT ONE APPLICATION FOR EACH DOG APPLYING TO ATTEND.  
YOU DO NOT NEED TO REPEAT YOUR OWN PERSONAL INFORMATION FOR EACH DOG.

**CLIENT INFORMATION**

**PLEASE LIST ALL OWNERS**

1 NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

2 NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

PROVINCE: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

**EMERGENCY CONTACT:**

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

**ALTERNATE PERSON WHO MAY PICK UP YOUR DOG (S):**

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_



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**DOG INFORMATION:**

NAME: \_\_\_\_\_

BREED: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

SPAYED/NEUTERED: YES \_\_\_\_\_ No: \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_  
(ALL DOGS OVER 6 MONTHS OF AGE MUST BE SPAYED/NEUTERED)

PRIMARY COLOR: \_\_\_\_\_

OTHER COLOR: \_\_\_\_\_

CITY LICENSE#: \_\_\_\_\_  
(ALL DOGS MUST HAVE A CITY LICENSE PRESENT)

MICROCHIP/TATTOO #: \_\_\_\_\_

**DOG HEALTH INFORMATION**

DOG HAS BEEN VACCINATED FOR THE FOLLOWING:  
(Please check all that apply)

**BORDATELLA (KENNEL COUGH)** \_\_\_\_\_

(If this is your first time vaccinating for Bordatella please administer 10 days prior to your dogs first visit)

**RABIES** \_\_\_\_\_

**DA2PP** \_\_\_\_\_

(Canine Distemper, Adenovirus Type 2, Parainfluenza, Canine Parvovirus and Canine Coronavirus)

**PLEASE ATTACH PHOTOCOPY OF VACCINATION RECORD**

(Vaccinations must be up-to-date to attend Day Care)

**PUPPIES MUST BE AT LEAST 14 WEEKS OLD AND HAVE HAD THEIR SECOND SET OF VACCINATIONS**

**FLEA/TICK/LICE PREVENTION** \_\_\_\_\_ **DATE APPLIED:** \_\_\_\_\_

**DOGS MUST BE CURRENT ON SOME FORM OF FLEA/TICK/LICE PREVENTATIVE**

(Example: Frontline or Advantage)

**Which is to be applied monthly or seasonally in order to attend Day Care.**

Please speak to your veterinarian regarding which treatment is best for your dog.



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VET CLINIC NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

DOCTOR NAME: \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

MEDICATION REQUIRED: YES \_\_\_\_\_ NO \_\_\_\_\_

(Medication can be administered for an additional fee of \$2.00 per Dosage)

PLEASE LIST: \_\_\_\_\_

(Times to be administered, AM/PM)

ALLERGIES: YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE LIST: \_\_\_\_\_

DOES YOUR DOG HAVE ANY PHYSICAL LIMITATIONS THAT REQUIRE THEIR ACTIVITY TO BE MONITORED/RESTRICTED?

YES \_\_\_\_\_ NO \_\_\_\_\_

PHYSICAL LIMITATIONS: \_\_\_\_\_

(Arthritis, Dysplasia, etc)

ANY LUMPS, BUMPS, HOTSPOTS OR SCARS WE SHOULD BE MADE AWARE OF?

YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE LIST: \_\_\_\_\_

DOES YOUR DOG HAVE DIFFICULTY SEEING OR HEARING? YES \_\_\_\_\_ NO \_\_\_\_\_

ARE THERE ANY PLACES YOUR DOG DOES NOT LIKE TO BE TOUCHED? YES \_\_\_\_\_ NO \_\_\_\_\_

(Paws, Ears, Tail, etc)

PLEASE LIST: \_\_\_\_\_

DOES YOUR DOG LIKE TO BE PICKED UP? YES \_\_\_\_\_ NO \_\_\_\_\_

IN THE EVENT OF AN EMERGENCY, URBAN DOGS HAS PERMISSION TO TRANSPORT MY DOG(S) TO THE ABOVE VETERINARIAN OR TO THE NEAREST ANIMAL CLINIC. IF NECESSARY, PAYMENT ARRANGEMENTS ARE TO BE MADE BETWEEN THE OWNER AND THE VETERINARIAN.

URBAN DOGS HAS THE SIGNING AUTHORITY FOR EMERGENCY TREATMENTS OR PROCEDURED IN THE EVENT THAT CRITICAL CARE IS NEEDED. YES \_\_\_\_\_ NO \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



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**DOG TRAINING:**

DOES YOUR DOG ATTEND ANY OBEDIENCE CLASSES? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, WHAT LEVEL HAS BEEN COMPLETED? \_\_\_\_\_

IF YES, WHERE DID YOU TAKE YOUR TRAINING? \_\_\_\_\_

WHAT INSTRUCTIONS DOES YOUR DOG FOLLOW?  
(Come, sit, stay, down, off, wait, leave it)  
\_\_\_\_\_  
\_\_\_\_\_

DOES YOUR DOG JUM ON YOU OR OTHER PEOPLE? YES \_\_\_\_\_ NO \_\_\_\_\_

**DOG BACKGROUND INFORMATION:**

HOW LONG HAVE YOU OWNED YOUR DOG? \_\_\_\_\_

WHERE DID YOU GET YOUR DOG?  
(Breeder, Rescue Group, Shelter, Pet Store, Etc) \_\_\_\_\_

IF YOUR DOG WAS ADOPTED, DO YOU HAVE KNOWLEDGE OF HIS/HER PREVIOUS HISTORY? PLEASE PROVIDE DETAILS BELOW: \_\_\_\_\_  
\_\_\_\_\_

DOES YOUR DOG GET ANXIOUS WHEN LEFT ALONE? YES \_\_\_\_\_ NO \_\_\_\_\_  
(Whine, Bark, Pace, Etc) \_\_\_\_\_

DOES YOUR DOG BARK? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, WHAT DOES HE/SHE BARK AT? \_\_\_\_\_

DOES YOUR DOG GROWL? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, IS IT A PLAY OR A WARNING GROWL? \_\_\_\_\_

HAS YOUR DOG BEEN TO DOG DAY CARE BEFORE? YES \_\_\_\_\_ NO \_\_\_\_\_

DOES YOUR DOG PLAY WELL WITH OTHER DOGS YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR DOG NERVOUS AROUND NEW PEOPLE? YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR DOG NERVOUS AROUND NEW DOGS? YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR DOG NERVOUS AROUND LARGER GROUPS OF DOGS? YES \_\_\_\_\_ NO \_\_\_\_\_



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**DOG BACKGROUND INFORMATION CONTINUED:**

DOES YOUR DOG GO TO THE DOG PARK? YES \_\_\_\_\_ NO \_\_\_\_\_  
IS YOUR DOG FEARFUL? YES \_\_\_\_\_ NO \_\_\_\_\_  
HAS YOUR DOG EVER SHOWN AGRSSION TOWARDS PEOPLE? YES \_\_\_\_\_ NO \_\_\_\_\_  
HAS YOUR DOG EVER SHOWN AGRSSION TOWARDS OTHER DOGS? YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR DOG NERVOUS AROUND A SPECIFIC TYPE OF HUMAN, DOG, OR EVENT?  
(Tall men, People in hats, Children, Thunderstorms, Etc) YES \_\_\_\_\_ NO \_\_\_\_\_  
PLEASE LIST: \_\_\_\_\_  
\_\_\_\_\_

PLEASE CHECK ANY THAT APPLY TO YOUR DOG:

VERY HIGH ENERGY (Extermely active) \_\_\_\_\_  
MODERATE ENERGY \_\_\_\_\_  
LOW ENERGY (Likes to lounge a lot) \_\_\_\_\_  
LIKES OTHER DOGS \_\_\_\_\_  
DOES NOT CARE ABOUT OTHER DOGS \_\_\_\_\_  
DOES YOUR DOG GET ALONG WITH: SMALL DOGS \_\_\_\_\_ LARGE DOGS \_\_\_\_\_

IS YOUR DOG ALLOWED TO HAVE TREATS DURING THE DAY?  
YES \_\_\_\_\_ NO \_\_\_\_\_ TREATS AT HOME ONLY \_\_\_\_\_

DOES YOUR DOG HAVE FOOD ALLERGIES? YES \_\_\_\_\_ NO \_\_\_\_\_  
PLEASE LIST: \_\_\_\_\_  
\_\_\_\_\_

DOES YOUR DOG NEED TO BE FED DURING THE DAY? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, AT WHAT TIME? \_\_\_\_\_  
(Please remember to bring your dog's required food preportioned and labeled)

PLEASE CHECK YOUR DOGS FAVORITE ACTIVITIES:

BALL \_\_\_\_\_ TUG \_\_\_\_\_  
CUDDLE \_\_\_\_\_ BELLY RUB \_\_\_\_\_  
BRUSHING \_\_\_\_\_ MASSAGE \_\_\_\_\_  
OTHER \_\_\_\_\_  
\_\_\_\_\_

WHERE IS YOUR DOGS FAVORITE PLACE TO BE PETTED?  
(Under chin, on the tummy, etc)  
\_\_\_\_\_  
\_\_\_\_\_

WHAT ARE YOUR FAVORITE THINGS ABOUT YOUR DOG?  
\_\_\_\_\_  
\_\_\_\_\_

IS THER ANY ADDITYIONAL INFORMATION THAT WILL HELP US CARE FOR YOUR DOG?  
\_\_\_\_\_  
\_\_\_\_\_



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**URBAN DOGS  
SMALL DOG DAY CARE  
OWNER AGREEMENT AND WAIVER**

DOG'S NAME: \_\_\_\_\_

BREED: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

- 1 I Hereby represent that I am the legal owner of the dog described above (the "Dog") to be enrolled in Urban Dogs Small Dog Day Care ("Urban Dogs")
- 2 I hereby release Urban Dogs, its employees, owners, representatives and agents from any and all liability which I, the Dog, any third party or their pet may suffer. Including and specifically, but not without limitation, any injury or damage whatsoever arising from my actions or failure to act, the Dog's actions or generally the Dog's attendance and participation at Urban Dogs.
- 3 I Hereby agree to indemnify and hold harmless Urban Dogs, its employees, owners and agents from any and all claims, including but not limited to claims be myself or any third party accompanying me to a function or Urban Dogs, or while attending the premises thereof, as a result of any action or failure to act by me or the Dog.
- 4 I hereby represent that the Dog is of good health and has not been ill with any known contagious diseases within the last thirty days.
- 5 I recognize that the health of the Dog is my personal responsibility, I hereby represent that all required vaccinations for the Dog are up to date and will continue to remain so for as long as the Dog attends Urban Dogs. I will also promptly provide proof of all booster vaccinations to Urban Dogs.
- 6 I further understand and agree that in admitting the Dog, Urban Dogs has relied on my representation that the Dog is in good health and has not harmed or shown aggression or threatening behaviour towards any person or any other dog.
- 7 I understand that by bringing the Dog to an open concept care facility means that they will be playing and interacting with other dogs. Although various sorts of minor incidents such as cuts or scratches are inevitable, and, though the dogs are carefully supervised at all times, and the staff and owners do their utmost to keep them safe, there is no warranty or representation by Urban Dogs that a more serious incident (Scuffles, fighting, even death) will not occur. I accept the risk of any such more serious incident happening.
- 8 I further understand and agree that Urban Dogs and their caregivers will not be liable for any problems that might develop with the Dog, including, but not limited to, sickness, disease, injury, running away and death, provided that reasonable care and precautions are followed



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9 I understand that during the day, the Dog will be taken for a short walk, during this time, they will be harnessed with a double leash system, however, should the Dog get free or any injuries occur, Urban D and their caregivers will not be liable. I am fully aware of the risks of taking the Dog off property and give my consent.

**PLEASE INITIAL AND ACKNOWLEDGE** \_\_\_\_\_

- 10 I understand I am solely responsible for any harm caused by the Dog to another dog or to any person while the dog is attending Small Dog Day Care at Urban Dogs. If for any reason, Urban Dogs is unable to further care for the Dog, I must have an emergency contact available to pick up and care for the Dog
- 11 I further understand and agree that any problem that develops with the Dog will be treated as deemed best by Urban Dogs in its sole discretion and that I assume full financial responsibility for any expenses involved.
- 12 The hours of operation of Urban Dogs are 7:30 am to 6:00 pm (Closing Time") Monday to Friday (except Statutory Holidays) and I agree that management of Urban Dogs retains the right to amend the hours of operation at any time.
- 13 I understand that I must pay in full for care and services rendered before the Dog is released from Urban Dogs into my custody.
- 14 I agree to pick up the Dog prior to Closing Time. It is hereby acknowledged that should I fail to pick up the Dog before Closing Time, a Late Fee of \$5 per minute, per dog is to be paid upon my arrival at Urban Dogs and before the Dog is released from Urban Dogs into my custody. If the Dog is not picked up 1 hour after Closing Time, the Dog will be taken to an overnight boarding facility of Urban Dogs' choosing at the owner's expense.

**PLEASE INITIAL AND ACKNOWLEDGE** \_\_\_\_\_

- 15 I understand that I am to walk the Dog in and out of the facility on a leash, and in a safe and expedient manner.
- 16 I agree that the Dog may be videotaped, photographed, and/or recorded. Urban Dogs shall be the Exclusive owner of the results and all proceeds of such taping, photography, and recording.
- 17 Urban Dogs reserves the right to permanently remove a Dog from its Day Care at any time.
- 18 Urban Dogs Day Care fees are non-refundable and non-transferable.
- 19 If the Dog attends Urban Dogs on multiple dates then this agreement applies to each and every date, until I provide notice of cancellation in writing to Urban Dogs.

I, \_\_\_\_\_ (Owner's Name) certify that I am eighteen years of age or older and I have the legal capacity to enter into a binding contract. I am the only owner of the Dog, or if I am not, then I have advised Urban Dogs who the other owner (s) is (are). Further, I certify that I have read and understand the rules and regulations as set forth in ths agreement. I agree to abide by the rules and regulations and accept all the terms, conditions, and statements of this agreement.

OWNER'S SIGNATURE \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_