



TEGA K9, LLC Dog Daycare & Training

Off-Leash Play & Train Application

We love dogs and want your dog to love attending and participating in leash free play groups and training. No one knows your dog better than you, so we'd appreciate you taking the time to fill out this application. The more we know about the dogs in our care, the better their experience will be.

Client (Guardian) Information

Guardian's Name & Phone #(s):	Spouse / Partner Name & Phone #(s):
Email address used for your account & communication:	Home Address:
How did you first hear about Tega K9?	

Dog Information *Please submit one application for each dog you would like to have in our leash free play and / or training.*

Dog's Name:	Gender:	Breed (If a mix, list two predominant breeds in behavior):
Current Age:	DOB:	How long have you owned your dog?
Where did you get your dog? <input type="radio"/> Newspaper Ad <input type="radio"/> Breeder <input type="radio"/> Animal Shelter <input type="radio"/> Friend <input type="radio"/> Rescue Group <input type="radio"/> Stray <input type="radio"/> Pet Store <input type="radio"/> Other: _____		What do you know about your dog's past history?
Why are you considering having your dog attend Tega K9? <input type="radio"/> Play with other dogs <input type="radio"/> So not home alone; check here <input type="radio"/> if exhibits signs of separation anxiety <input type="radio"/> Exercise: Primary Source or... <input type="radio"/> Additional source of exercise <input type="radio"/> Potential Training Program <input type="radio"/> Recommended by other pet professional (trainer, vet, etc.); Reason _____ <input type="radio"/> Other: _____		
Which of the following best describes your dog's level of socialization with other dog's: <input type="radio"/> None – No knowledge of other dog interaction <input type="radio"/> Minimal – On leash encounters only and / or other dog (s) living in the home <input type="radio"/> Moderate – Some off leash playtime on occasion with visitor's / neighbor's / friend's dog's <input type="radio"/> Extensive – Regular visits to social events, off leash dog parks, dog daycare, etc.		
Has your dog had any problems previously in an off-leash social environment? <input type="radio"/> NO <input type="radio"/> YES (Check all that apply) <input type="radio"/> Altercation or or fight at a public dog park <input type="radio"/> Altercation or fight with a neighbor or friend's dog <input type="radio"/> Fearful reaction in a group of dogs <input type="radio"/> Dismissed from a prior dog daycare or social playgroup program (If yes, complete the next question below) <input type="radio"/> Other (please describe) _____		

Health & Veterinary Information (If you need us to refer a vet to you, please let us know we are happy to give recommendations)

Your veterinarian's practice name and the veterinarian your dog sees: (If vaccination records containing your veterinarian's detailed contact information is submitted with this, no need to complete this box).							
Please describe your dog's flea/tick control and prevention program:							
Does your dog have any allergies? If yes, please explain:							
Does your dog have any medical conditions? If yes, please explain: If medication is used to control the condition, please provide name and dosage:							
Does your dog have any physical disabilities? If so, please explain disability and cause: If answered yes, what restrictions need to be placed on your dog's activities or movements?							
<table style="width: 100%; border: none;"> <tr> <td style="border: none;"><input type="radio"/> No jumping</td> <td style="border: none;"><input type="radio"/> No contact with other dogs</td> <td style="border: none;"><input type="radio"/> Other (please explain):</td> </tr> <tr> <td style="border: none;"><input type="radio"/> No running</td> <td style="border: none;"><input type="radio"/> No hard play</td> <td style="border: none;"></td> </tr> </table>		<input type="radio"/> No jumping	<input type="radio"/> No contact with other dogs	<input type="radio"/> Other (please explain):	<input type="radio"/> No running	<input type="radio"/> No hard play	
<input type="radio"/> No jumping	<input type="radio"/> No contact with other dogs	<input type="radio"/> Other (please explain):					
<input type="radio"/> No running	<input type="radio"/> No hard play						
Provide details of your dog's diet							
1) Type (kibble, canned, raw / natural): 2) Brand (Innova, Iams, Purina, etc.): 3) Primary protein source (Fish, Chicken, lamb, etc.): 4) Feeding Schedule (Free, scheduled times, etc.):							
On what type of surface does your dog generally go to the bathroom (e.g., grass, mulch, pee pads, etc)?							
Does your dog have any bathroom related issues or concerns?							
How often do you brush or comb your dog's coat?	How does your dog react to having his/her nails clipped?						
Does your dog like to be brushed? If no, what have you tried to make it more enjoyable?							
Does your dog have any sensitive areas on his/her body? If yes, where?							
Where are your dog's favorite petting spots?							
How frequently is your dog walked outside?	How long are your walks?						
Check the circle below that best describes your dog's overall level of exercise routine:							
<table style="width: 100%; border: none;"> <tr> <td><input type="radio"/> Couch Potato: Spends days sleeping, occasional walks and/or playtime with humans or other dogs.</td> </tr> <tr> <td><input type="radio"/> Mild Exerciser: Short daily walks and/or regular playtime with humans and other dogs.</td> </tr> <tr> <td><input type="radio"/> Moderate Exerciser: Long or multiple walks daily and/or regular playtime with humans and other dogs.</td> </tr> <tr> <td><input type="radio"/> Athlete: Regular jogs/runs and/or regular participation in a dog sport activity such as agility, flyball, frisbee, etc.</td> </tr> </table>		<input type="radio"/> Couch Potato: Spends days sleeping, occasional walks and/or playtime with humans or other dogs.	<input type="radio"/> Mild Exerciser: Short daily walks and/or regular playtime with humans and other dogs.	<input type="radio"/> Moderate Exerciser: Long or multiple walks daily and/or regular playtime with humans and other dogs.	<input type="radio"/> Athlete: Regular jogs/runs and/or regular participation in a dog sport activity such as agility, flyball, frisbee, etc.		
<input type="radio"/> Couch Potato: Spends days sleeping, occasional walks and/or playtime with humans or other dogs.							
<input type="radio"/> Mild Exerciser: Short daily walks and/or regular playtime with humans and other dogs.							
<input type="radio"/> Moderate Exerciser: Long or multiple walks daily and/or regular playtime with humans and other dogs.							
<input type="radio"/> Athlete: Regular jogs/runs and/or regular participation in a dog sport activity such as agility, flyball, frisbee, etc.							

Household Information

Complete table with information regarding other pets in household:

Species	Breed	Age	Gender	Spayed / Neutered
1.			Male Female	Yes No
2.			Male Female	Yes No
3.			Male Female	Yes No
4.			Male Female	Yes No
5.			Male Female	Yes No
How does your dog get along with these other household animals?				
How does your dog react to unfamiliar cats or small animals she/he sees on walks?				
Does your dog like children? YES___ NO ___ UNKNOWN___				
Do any visitors bring their dog(s) to your house? If yes, how do they get along?				
How does your dog react to a stranger coming in to your home or yard?				
Does your dog ever bark or growl at anyone passing outside your home or yard? If yes, please				
Has your dog been exposed to an electronic collar for fencing, barriers, barking, remote training? YES___ NO___ UNKNOWN___ NEVER WILL ___ MAYBE IN FUTURE___				
If yes, please indicate all that apply:				
<input type="radio"/> Invisible Fencing <input type="radio"/> Barrier <input type="radio"/> Bark Collar <input type="radio"/> Remote Training Collar	<input type="radio"/> Purchased New Online or Pet Store <input type="radio"/> Purchased through a professional <input type="radio"/> Received as a "gift" <input type="radio"/> Purchased second hand or already installed	<input type="radio"/> Introduced / taught by a professional <input type="radio"/> Taught to dog yourself <input type="radio"/> Taught by a friend / relative/ etc. <input type="radio"/> Still utilize daily or regular basis <input type="radio"/> No longer use		

Dog / Dog and Dog / Human Relations

Are there any types and/or breeds of dogs your dog seems to automatically fear or dislike? If yes, please describe:
How does your dog react to puppies?
How does your dog react to another dog approaching him/her in a park, at the beach, or on a walk? On Leash: _____ Off Leash: _____
Does your dog play with other dogs regularly? If yes, which type? Males and Females _____ Males Only _____ Females Only _____ Please describe size, breed, & temperament of the other dogs:
What types of games does your dog play with other dogs?
What kinds of games does your dog play with people?

Has your dog ever shared his/her food or toys with other animals? If yes, how does your dog react to another dog approaching her/his food or toys?

Which communication cues does your dog know? Please check all that apply:

- | | | | |
|----------------------------|-------------------------------------|--------------------------------|-----------------------------------|
| <input type="radio"/> Sit | <input type="radio"/> Come (Recall) | <input type="radio"/> Rollover | <input type="radio"/> Touch |
| <input type="radio"/> Stay | <input type="radio"/> Heel | <input type="radio"/> Find it | <input type="radio"/> Watch me |
| <input type="radio"/> Down | <input type="radio"/> Wait | <input type="radio"/> Leave it | <input type="radio"/> Other _____ |

How did your dog get his/her manners / communication cue training? Please check all that apply:

- Attended one group class
- Attended more than one level of group classes (beginner and intermediate, etc.)
- Dog was sent to a board and train program
- Day Training Program
- Private sessions in home
- Other, please explain: _____

Which of the following best describes the use of manners /and communication cues used at home?

- Key part of daily communication
- Used when we go on walks or have people over
- Used occasionally to better lead behavior and routines
- Rarely used
- Not applicable

What type of collar do you use to walk your dog?

- | | | |
|---|--|--|
| <input type="radio"/> Buckle | <input type="radio"/> Harness – Front clip | <input type="radio"/> Remote training collar |
| <input type="radio"/> Nylon / Chain Choke Collar | <input type="radio"/> Head Collar | <input type="radio"/> Other _____ |
| <input type="radio"/> Harness – Leash clips on back | <input type="radio"/> Prong / Pinch | |

Is the current collar effective in keeping your walk pleasant / enjoyable for you and your dog? YES _____ NO _____

Has your dog ever gotten away from someone when out for a walk? If yes, please explain the circumstances:

Where does your dog sleep? (Please check all that apply):

- | | | |
|---|--|---|
| <input type="radio"/> Inside the house | <input type="radio"/> In a crate- in a room with people | <input type="radio"/> In a dog bed – in a room alone |
| <input type="radio"/> Outside the house | <input type="radio"/> In a crate – in a room alone | <input type="radio"/> In your or another person's bed |
| <input type="radio"/> Inside / Outside - Varies | <input type="radio"/> In a dog Bed – in a room with people | <input type="radio"/> Other: _____ |

Has your dog ever jumped up on someone? If yes, please explain circumstances:

How does your dog react when you get home at the end of the day?

What does your dog do to show he/she is happy?

What does your dog do to show he/she is upset?

Is your dog allowed on furniture at home?

Does your dog have any problems in any of the following areas? If yes, please explain:

- Mouthing: _____
- Housetraining: _____
- Barking: _____
- Digging: _____
- No response to communication cues: _____

Does your dog know any tricks? If yes, please describe:

Dog Behavior Information

Are there any particular types of people your dog seems to automatically fear or dislike?
Has your dog ever growled at someone? If yes, what were the circumstances and how did you respond?
Has your dog ever bitten a person? If yes, what were the circumstances and how did you respond? Please describe injuries (if any).
Has your dog ever bitten another animal? If yes, what were the circumstances and how did you respond? Please describe injuries (if any).
To the best of your knowledge, what does your dog do when you're not at home?
Has your dog ever climbed/jumped a fence? If yes, what were the circumstances? How high was the fence?
Has your dog ever escaped from your house or yard? If yes, please explain the circumstances.
How would you describe the energy level of your dog? Low ____ Medium ____ High ____
Has your dog ever chased or tried to chase a small animal? If yes, what were the circumstances?
Has your dog ever chased someone (or wanted to) on a skateboard or bicycle? If yes, what were the circumstances?
Is your dog frightened by thunderstorms? If yes, describe typical behavior and what specifically helps to relax your dog or calm his/her fear.
Is your dog frightened or nervous around anything else? If yes, please explain.
Does your dog play with any toys? If yes, what kinds of toys does your dog like?
Has your dog ever growled or snapped at a person who has taken food or toys away from him/her? If yes, what were the circumstances and how did you respond?
Has your dog ever growled or snapped at another dog who has taken food or toys away from him/her? If yes, what were the circumstances and how did you respond?
Have you ever noticed your dog stopping and staring at another animal? Has your dog ever growled or snapped at a person who has taken food or toys away from him/her? If yes, what were the circumstances?
Other comments or information about your dog that you feel might be helpful?

EMERGENCY INFORMATION

If your dog becomes ill or injured, whom do you want us to call first and what number? (If the contact provided is unavailable we will refer to the contact numbers indicated above.) _____

If your dog becomes ill or injured and we need to transport for immediate veterinary care, we will transport to the following Veterinary Clinics: Baxter Veterinary Clinic, Veterinary Medical Center of Fort Mill, Tega Cay Animal Hospital or Palmetto Pet Hospital. If you're not a client at any of the named vet practices, we will default to the Baxter Veterinary Clinic as they are a highly recommended veterinary clinic and we have an agreement with them to see our dogs immediately in the event of an emergency.

TEGA K9, LLC is not responsible for vet bills in the event that your dog becomes ill or injured.

RULES & REGULATIONS

Our goal at Tega K9, LLC is to provide a safe, fun and stimulating social environment for dogs. We believe having dog care alternatives, busy pet owners can feel better about leaving their pets while they are away. To ensure the safety and health of your dog and our other guests, we require all of our guests to comply with the following rules and regulations.

1. All dogs must be well-socialized, or in private training.
2. Owners/Guardians must certify that their dog(s) have not harmed or shown any aggressive or threatening behavior toward people or other dogs.
3. Tega K9, LLC has the right to refuse 'intact' dogs at our discretion.
4. We require proof of current rabies, DHPP (Distemper/Hepatitis/Parainfluenza/Parvovirus) and Bordatella (kennel cough) vaccinations. **Bordatella must be done every 6 months.**
5. All dogs must be clean and in good health with the exception of stable, post surgical dogs that are in need of daytime human supervision (These are special prearranged services).
6. All pets must be free from any condition which could potentially jeopardize other guests or themselves.
7. We recommend all dogs be on an oral flea treatment program. *Please do not administer a topical treatment within 7 days of visiting Tega K9.*
8. Please DO NOT BRING YOUR DOG TO DAYCARE if they are not well.
9. For the safety of all dogs and our guests, dogs must be escorted in and out of Tega K9 on leash.
10. All dogs must wear "quick release" collars.
11. Harnesses may be worn in addition to collars however, we have a "Play Naked Policy" – which allows dogs to play without any collars or harnesses to be worn to prevent injuries. With that, we can not guarantee we will be able to put a harness back on your dog at the end of the day due to the high volume of dogs going out during the checkout period.
12. Tega K9 dogs must have a completed registration and release form on file, with medical, contact and behavioral information.
13. All dogs MUST have a complete full day screening session/evaluation. Evaluations are \$28 by appointment Monday-Friday.
14. Services are due at the time of pickup or in advance.
15. Owners are fully responsible for any aggression or injuries their dog may instigate. Also, owners are responsible for vet bills if they injure another dog. (note: dogs although evaluated, can be unpredictable and all dogs will have random time outs to give break time. Dogs can share coughs, sniffles, eye infections and general "cooties" just like children at daycare.)
16. Tega K9, LLC will post any illnesses that exceed 1% of our population and is not responsible for vet bills of this nature. If your dog is ill and you are unavailable, we will make accommodations to take him to your local vet or Baxter Veterinary Clinic if your vet is not in close proximity.
17. We are an indoor and outdoor training/daycare facility. If it rains or snows, our outdoor play yard will get wet and subsequently, your dog may get wet from the turf being rained/snowed on. We also have sand boxes for your dogs enjoyment. If these get wet, we do our best to keep dogs out of them however, some dogs are persistent and will work really hard to get in them to dig (a favorite past time for many). We cannot guarantee your dog will go home clean (but we do our best to have them going home as close to it as possible) due to our main goal of providing a fun, safe, mentally and physically stimulating playday and environment.
18. For optimal safety, Tega K9, LLC has limits on bully and herding breeds. Please see our manager or trainers for more explanation as they will handle all evaluations for these breeds.
19. We reserve to refuse service to anyone, for any reason, at any time.

PAYMENT

Payments must be made in full and in advance for daycare / training. Tega K9, LLC accepts cash, checks, credit, and debit cards. **No Refunds for Daycare or Day Training. Any remaining balance at the end of the service day, will be charged to your card on file.**

LIABILITY WAIVER / RELEASE AGREEMENTS & POLICIES

1. I understand that I am financially responsible for any damage to Tega K9, LLC facilities and equipment caused by my dog.

(Please initial) _____

2. I understand if I do not pick up my dog by 6:30pm (for full day daycare/training, a fee of \$25 for the first 15 minutes and \$1 per minute after the first 15 minutes will be billed to your account. If my dog is here for morning half day daycare and is not picked up by 12 noon, I will be charged the full one day rate and my dog will not be available for pick up until 2pm (afternoon hours). Tega K9, LLC hours are 6:30am - 12pm and 2pm-6:30pm, Monday-Friday. I understand Tega K9, LLC is closed to the public between 12pm-2pm for lunches (K9's and staff), as well as needed rest & quiet time for the dog's. (Please initial) _____

ANIMAL MEDICAL POWER OF ATTORNEY

Tega K9, LLC will make every effort to contact you in the event of a medical emergency involving your pet. However, if we should be unable to reach you, we will need formal authorization to request care for your pet on your behalf. Please review the following Animal Medical Power of Attorney, and if acceptable, sign below.

I, the undersigned owner, hereby designate Tega K9, LLC ("TK9") to act as my attorney-in-fact and to act in my name for the emergency medical benefit of my pet upon the terms and conditions outlined below.

1. Effectiveness. The Animal Medical Power of Attorney shall become effective in the case of medical emergency requiring immediate care for my pet during my absence or if deemed necessary to preserve the life or well being of my pet.

2. Powers. By the execution of this Animal Medical Power of Attorney, it is my intention that my attorney-in-fact shall have authority to make all emergency healthcare decisions for my pet to the same extent I would, including but without limitation, the following: to employ and discharge medical personnel; to execute documents; to provide written consents/releases for treatment; to obtain and administer prescribed medications; and to incur reasonable and necessary fees and costs in carrying out the powers and duties under this document that shall be reimbursed by me upon demand by TK9.

3. Indemnification. I shall hold harmless and indemnify my attorney-in-fact from all liability for acts done in good faith.

ASSUMPTION OF RISK AND INDEMNIFICATION

1. Assumption of Risk. I understand and acknowledge that pets can be extremely unpredictable in behavior and while TK9 performs its services, the chance of injury to my pet is possible. I assume all risks related to TK9's services to my pet (with the exception of gross negligence of TK9), including but not limited to: illness, bodily injury; death; theft; bites; collisions with vehicles; natural disasters; the unavailability of emergency medical care; or the negligence or deliberate acts of third parties.

2. Release of Liability. I agree not to sue and to release from liability TK9, its officers, contractors, owners, agents, employees and other persons or entities involved with the services offered by TK9, from all actions claims or demands for injury, loss or damage regardless of the cause.

3. Indemnification. I understand and acknowledge that pets can be extremely unpredictable in behavior and may cause damage to third parties for which TK9 could be held liable. I agree to bear any and all damages, losses, liabilities, demands and expenses, including legal and professional fees TK9 may incur as a result of any damage caused by my pet, and I agree to defend, and hold TK9 harmless for any liability thereon.

IT IS THE INTENTION OF THE PARTIES TO THIS AGREEMENT THAT THE FOREGOING RELEASES SHALL BE EFFECTIVE AS A BAR TO ALL ACTIONS, FEES, DAMAGES, LOSSES, CLAIMS, LIABILITIES, DEMANDS OR DEBTS WHATSOEVER, OF ANY NATURE OR KIND, KNOWN OR UNKNOWN, SUSPECTED OR UNSUSPECTED, ARISING OUT OF THE PERFORMANCE OF TK9'S SERVICES. THE PARTIES TO THIS AGREEMENT EXPRESSLY CONSENT THAT THIS RELEASE SHALL BE GIVEN FULL FORCE AND EFFECT IN ACCORDANCE WITH EACH AND ALL OF ITS EXPRESS TERMS AND PROVISIONS.

I understand that this Agreement contains an Animal Medical Power of Attorney, release of liability and contract between TK9 and me and I am signing this agreement of my own free will. If any part of this Agreement is deemed unenforceable, all parts shall be given full affect to the extent possible. If there is a dispute between the parties relating to this Agreement, the party substantially prevailing will be entitled to recover all costs and expenses of any subsequent proceedings (including trial, appellate and arbitration proceedings), including the attorney fees incurred therein. This Agreement contains the complete understanding of the parties with respect to the subject matter hereof and supersedes all prior presentations and understandings, whether oral or written. This Agreement may be modified only by writing and signed by both parties.

This contract is validated by the signatures below in total and as approval for future services without additional written authorization.

Dog Guardian Date

Day Care Representative & Title Date