

## The Spotted Spa Retreat Consent Form

### Guest Info:

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Breed: \_\_\_\_\_ Sex: Neutered Spayed Male Female

Colour: \_\_\_\_\_ Markings: \_\_\_\_\_

Microchip: \_\_\_\_\_ Tattoo: \_\_\_\_\_

### Feeding Instructions:

Brand: \_\_\_\_\_ Amount: ½ cup 1 cup 1 ½ cups 2 cups

Frequency: once daily twice daily three times Preparation: wet dry mixed

### General Information:

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

How long have you had your pet? \_\_\_\_\_

Has your pet been in a boarding facility before? YES NO

If yes length of stay: \_\_\_\_\_

Has your pet been to a dog park in the past month? YES NO

Do you have any other pets at home? YES NO

Is your pet an escape artist? YES NO

If yes explain how: \_\_\_\_\_

Is your pet used to wearing a collar? YES NO

Is your pet leash-trained? YES NO

Does your dog play well and safely with other dogs (small and large) YES NO

Are there any breeds your dog generally does not like

If YES please list breeds \_\_\_\_\_

Does your dog respond to command? YES NO

If YES please list commands \_\_\_\_\_

Is your dog friendly with visitors at home? YES NO

**\*PLEASE CIRCLE IF YOUR DOG HAS SHOWN AGGRESSION TOWARDS**

Strangers Children Visitors People in uniform Other Animals Men Women

Other: \_\_\_\_\_

What best describes your dog (circle any that apply):

Barks Often	Pulls on Leash	Protects Food	Protects Toys	Afraid of Noise
Nervousness	Shares Easily	Sleeps in a Crate	Sleeps Alone	Sleeps with you
Chews Objects	Urinate Inside	Likes car rides	Bitten an Animal	Bitten a Person

Any additional info that may be helpful in making your pet's stay most enjoyable: \_\_\_\_\_