

**Camp Ruff It
Daycare & Boarding
Enrollment/Interview Form**

399 Gundersen Dr., Carol Stream, IL 60188
phone: 630-690-0281
fax: 630-690-0284

Owner's information:

Name: _____ Home phone: _____

Address: _____

Cell phone: _____ Work phone: _____ Email _____

Emergency contact if we cannot reach you:

Name: _____ Phone: _____

Pet Information:

#1 Name: _____ Breed: _____

M/F (circle one) Spayed/Neutered (circle one) All dogs over 6 months old must be spayed/neutered to enroll.

Birthdate: _____ Color: _____ Weight: _____

#2 Name: _____ Breed: _____

M/F (circle one) Spayed/Neutered (circle one)

Birthdate: _____ Color: _____ Weight: _____

Veterinarian Information:

Name/Hospital: _____

Address: _____

Phone: _____ Fax: _____

How did you hear about Camp Ruff It Doggie Daycare & Boarding?

Pet Personality Profile:

Dog's Name _____

How long have you had your dog? _____

Where did you get your dog? _____

If your dog was adopted, do you have any information about the dog's history? _____

Circle all that apply to your dog:

Outgoing / timid / pushy / affectionate / submissive / insecure / excitable / playful / gentle / quiet / territorial / dominating / loud

What is your dog's activity level? Low / medium / high

How does your dog act while riding in a car? Enjoys it / dislikes it / neutral

Is your dog normally crated for car rides? _____

Circle all situations in which your dog may become unfriendly or aggressive:

Grabbing collar / hugging / removing from furniture / touching ears, feet, tail etc.

Other _____

If your dog becomes unfriendly he/she will bite / may bite / growl / show teeth / tremble / raise hair on back / move away

Is your dog sensitive to noise? _____

Does your dog like other people? _____

How is your dog kept when you are not home? Caged or free to roam

Are there any situations that make your dog aggressive? _____

How does your dog react when approached by other dogs? _____

Does your dog growl and become possessive of food or toys? _____

Has your dog ever bitten anyone? Describe situation _____

Has your dog ever tried to jump a fence? _____

Does your dog have any health issues? _____

What type of Flea and Tick preventative is your dog on? _____

When was it last administered? _____

Does your dog have any activity or play restrictions? _____

Is your dog allergic to anything? _____

What do you feed your dog and how often ? _____

Does your dog have any dietary restrictions? _____

Has your dog ever attended another daycare facility? _____

Does your dog like to be bathed? _____

Does your dog like to be brushed? _____

Does your dog react to having nails clipped? _____

Has your dog had any formal obedience training? _____

Does your dog respond to any commands? _____

Has your dog ever been in a fight with another dog? _____

Other information about your dog's temperament or any social issues we should be aware of:

The undersigned Guardian hereby warrants and represents that the information provided on this form is true and correct and that no information has been omitted that may change Camp Ruff It's decision to accept my dog for daycare and boarding. My dog has not been exposed to rabies, canine cough or other communicable diseases within a 30 day period prior to boarding for daycare and all vaccinations are current and will be maintained as outlined in the terms and conditions.

Date _____

Guardian Signature
