



DOGGIE DAY CARE RULES & REQUIREMENTS (RETAIN FOR YOUR RECORDS)

At Fuzzy Paws Doggie Day Care, our goal is to provide exceptional care for your pet in a safe and fun-filled environment that promotes good health and socialization. We have more than 20 years of pet care experience, and pride ourselves in providing loving and high quality care. To ensure the safety and health of all dogs, we must comply with the following:

1. Before your dog attends Doggie Day Care, a temperament assessment is conducted to ensure your dog is not dog, toy or food aggressive and to ensure your dog(s) is placed in the correct playgroup. You will be asked to leave your dog at Fuzzy Paws during the assessment which takes approximately 20 minutes. Temperament assessments are conducted only by appointment.
2. All day care dogs age six months or older must be spayed or neutered. Documentation of from the veterinarian must be provided. Puppies at least three months may attend provided they have completed their final (third) set of shots (see DHLPP/DHPP below). Once a puppy reaches age six months they will not be eligible to continue attending until they are spayed or neutered. All dogs must be housebroken.
3. At the time of the temperament assessment, your dog must meet the following health requirements. Photocopies of veterinarian records, including expiration dates, must be provided.. Dogs whose inoculations/tests are not current cannot be assessed or attend day care. It is the owner's responsibility to keep inoculations up to date and provide documentation to Fuzzy Paws Doggie Day Care.
 - Rabies—The Rabies certificate or veterinarian proof of vaccine must be provided, along with the rabies tag number. It is a Pennsylvania law that dogs over three months of age have a rabies vaccination. A booster is required one year later and follow-up boosters at least every three years thereafter.
 - DHLPP/DHPP—Distemper, Hepatitis, Leptospirosis, Parainfluenza, Parvovirus vaccinations must be current and kept up-to-date. Leptospirosis is optional and at the discretion of your veterinarian, but you should advise your veterinarian that your dog spends time in a rural setting.
 - Bordatella (Kennel Cough) – This immunization is generally given by your veterinarian only upon request and must be repeated every six months if your dog attends Day Care. If your dog has never had this immunization or if it has expired, it must be administered 7 days or more before the temperament assessment. It may be given as an injection or intranasal at the discretion of your veterinarian.
 - License—A Pennsylvania dog license for the current year is a state law for all dogs age three months and older. The license number must be provided. The license is issued by the County in which you reside and coordinated through the County Treasurer's Office. Applications are available at some veterinarian offices, pet store retailers and on line at www.agriculture.state.pa.us (click on "Consumers" and go to Dog law).
 - Fecal Test—All dogs must have a fecal flotation (feces sample) test by your veterinarian to check for parasites and bacterial infections. The test must be done within 30 days of the temperament assessment. The veterinarian record must show the fecal test was "clean." If any parasites or infections are found in the feces, your dog can not take the temperament assessment or attend day care until the test is repeated and the results are "clean." The fecal test must be repeated by your veterinarian every six months
4. By registering, owners are certifying that their dog(s) has not previously shown threatening or aggressive behavior towards any person or dog(s). Owners must sign a contract agreement and release certifying that their dogs(s) are not aggressive and have not shown threatening behavior towards any other person or dog(s).
5. Owners must complete the Application that includes personal and dog information, emergency contacts and Veterinarian information, and sign and date the Agreement and Release.

6. When attending, all dogs must be free from any illness or disease that could potentially be harmful to other dogs. Dogs must be in good general health and not been treated for a communicable illness in the past 14 days and/or have completed the prescribed antibiotics or treatment.. For example, mites, mange, conjunctivitis, whip worms, kennel cough, A veterinarian certification of health may be required in some instances.
7. If your dog(s) has a chronic condition such as hypo/hyper thyroid, diabetes, epilepsy, glaucoma or periodic seizures, you are responsible for informing Fuzzy Paws of the condition, any medication requirements and/or activity restrictions. A Veterinarian certification authorizing attendance may be required. Medications will be administered at no additional charge.
8. Fuzzy Paws recommends all dogs be on a preventive flea and tick program. Because of the rural setting, you also may want to consider vaccinating for Lyme's disease.
9. Fuzzy Paws is open Monday through Friday from 7:00 a.m. to 7:00 p.m. Dogs may be dropped off or picked up any time during Day Care business hours. There is a late charge of \$5.00 for every 15 minutes after 7:00 p.m. Special arrangements can be made at the time of reservation.
10. All dogs must arrive on a leash and wear a standard flat collar, preferable with an identification tag. Choke collars and prong collars are permitted only for arrival and departure and will be removed during play.



APPLICATION FOR DOGGIE DAY CARE

PLEASE PRINT

Today's Date _____

OWNER(S) INFORMATION

Name(s) _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Work Phone _____ Cell Phone _____

Other Phone: _____ E-Mail Address _____

EMERGENCY CONTACT (Other Than Owner)

Name(s) _____

Home Phone _____ Cell Phone _____

DOG INFORMATION

1. Dog's Name _____ Breed _____ Color _____

Age _____ Date of Birth _____ Weight _____ Sex: Male Female Spay/Neuter: Yes No

License ID Number _____ Issuing County _____ Rabies Tag Number _____

Chronic Health Problems & Medications Required _____

2. Dog's Name _____ Breed _____ Color _____

Age _____ Date of Birth _____ Weight _____ Sex: Male Female Spay/Neuter: Yes No

License ID Number _____ Issuing County _____ Rabies Tag Number _____

Chronic Health Problems & Medications Required _____

3. Dog's Name _____ Breed _____ Color _____

Age _____ Date of Birth _____ Weight _____ Sex: Male Female Spay/Neuter: Yes No

License ID Number _____ Issuing County _____ Rabies Tag Number _____

Chronic Health Problems & Medications Required _____

Please attach additional information about your dog(s) if needed. Thank you!

VETERINARIAN

Vet Hospital/Clinic _____

Address _____

Phone _____ Vet's Name _____

VACCINATIONS & LICENSE

You must attach a copy of the certificate or other documentation from your veterinarian that your dog(s) has been neutered/spayed (if your dog is age 6 months or older), has a valid State license and is current on all required vaccinations: Rabies, DHLPP/DHPP and Bordatella (Kennel Cough) and has had a negative or "clean" fecal test in the past 30 days.. Please review the "Rules & Requirements" for details on required immunizations.

PEOPLE AUTHORIZED TO PICK-UP YOUR DOG (Other Than Owner)

Name _____ Phone _____

Name _____ Phone _____

Your Dog(s) must be picked-up no later than 7 p.m. A \$5.00 late fee applies for each 15 minutes.

AGREEMENT AND RELEASE

1. In agreement of being permitted to use the services and facilities of Fuzzy Paws Doggie Day Care (here after referred to as Fuzzy Paws), I/we, the undersigned owners(s)/caregiver(s), hereby release, waive and discharge Fuzzy Paws owner, staff or volunteers from all liability for any and all loss or damage, and any resulting claim or damaged, on account of injury, loss, damage, infestation, or disease to my/our dog(s), even injury resulting in death, whether caused by the negligence of Fuzzy Paws, its owners, staff or volunteers or otherwise while my/our dog(s) are under the care of Fuzzy Paws.
2. I/We agree to indemnify Fuzzy Paws, its owners, staff and volunteers for any loss, liability, damage or cost they may incur due to my/our presence or the presence of my/our dog(s) in or upon Fuzzy Paws premises.
3. I/We hereby assume full responsibility for any harm caused by my/our dog(s) while in or on the premises and while my/our dog(s) is/are under the care of Fuzzy Paws. I/we further agree to indemnify Fuzzy Paws, its owners, staff and volunteers for any loss, liability, damage, or costs they may incur due to any harm caused by my/our dogs(s).
4. I/We expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Pennsylvania, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
5. I/We further understand and agree that in admitting my/our dog(s) to Fuzzy Paws, the owners of Fuzzy Paws have relied on my/our representation that my/our dog(s) is/are in good health and has/have not harmed or shown aggression or threatening behavior toward any person or any other dog(s).
6. I/We further understand and agree that any injury or illness that develops with my/our dog(s) will be treated as deemed best by Fuzzy Paws, including treatment by a Veterinarian, and that I/we assume full financial responsibility for any and all expenses involved, even if such expenses were later found to be unnecessary. Furthermore, should my/our dog(s) pass away during my/our absence, I/we direct that a Veterinarian may be called to safe keep my/our dog(s) until our arrival.
7. I/We certify that I/we have read and understood this Agreement and Release and agree to accept all the terms and conditions and statement of this agreement.

Today's Date: _____

Signature of Owner(s) _____