



WELCOME TO JUST HAPPY HOUNDS, LLC

Thank you for considering Just Happy Hounds as a resource for **YOUR BEST FRIEND'S** care. Our goal is to provide services that are convenient, happy, healthy and safe for you and your pets. To do so, we ask that you complete this form and set an appointment with us for a temperament evaluation of your pet(s). Your pet will be evaluated for reaction to humans, kennel run tolerance, destructiveness and socialization with humans and like sized playmates.

CONDITIONS FOR ACCEPTANCE TO A JUST HAPPY HOUNDS, LLC (JHH) FACILITY

- Completion of all registration documents
- Confirmation of your pet's inoculations
- Completion of a JHH temperance examination
- Dogs over six months of age are required to be spayed/neutered to socialize with other guests.
(A separate enrollment application is required for each dog that you wish to register.)

JUST HAPPY HOUNDS ENROLLMENT APPLICATION

PLEASE TELL US ABOUT YOU

How did you hear about JHH _____

DATE _____ OWNER(S) NAME(S) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE: HOME _____ WORK _____ CELL _____

E-MAIL _____

EMERGENCY CONTACT NAME _____ PHONE _____

NAME AND CONTACT INFO FOR OTHERS THAT I AUTHORIZE FOR PICK-UP/DROP-OFF AND EMERGENCIES:

PLEASE TELL US ABOUT YOUR DOG

PET NAME _____ BREED _____

PET AGE _____ BIRTHDATE _____ GENDER: M F

PET COLOR _____ WEIGHT _____ MICRO-CHIP # _____

SPAYED/NEUTERED: YES NO - AT WHAT AGE _____ HOW OLD WAS PET WHEN ACQUIRED _____

OBTAINED PET WHERE _____ HOW LONG HAVE YOU HAD PET _____

DATE _____ OWNER NAME _____ PET'S NAME _____

PLEASE TELL US ABOUT YOUR DOG'S HEALTH

ANIMAL HOSPITAL/CLINIC _____ CITY _____ STATE _____

PRIMARY VETERINARIAN _____ PHONE _____

FAX _____ EMAIL _____

ALTERNATE VET _____ CLINIC _____

PHONE _____ FAX _____ EMAIL _____

MY DOG'S RECENT OR CURRENT MEDICAL CONDITION(S) _____

MY DOG'S SPECIAL NEEDS/ALLERGIES _____

MONTHLY HEARTWORM TREATMENT _____

MONTHLY FLEA TREATMENT _____

OTHER MEDICATIONS _____

FOOD ALLERGIES _____

BRAND & FORMULA of DOG FOOD _____

INOCULATIONS- PLEASE PROVIDE CONTACT INFORMATION FOR CONFIRMATION OF YOUR DOG'S MOST RECENT INOCULATIONS:

Name _____ PHONE _____

FAX _____ E-MAIL _____

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS. Your honesty is very important. *Honest answers are very important to help make your dog and other dogs at our day care have a positive experience.*

WHAT IS YOUR DOG'S TRAINING HISTORY (CIRCLE ALL THAT APPLY)

NO TRAINING	TRAINED YOURSELF	PUPPY KINDERGARTEN
GROUP CLASSES BASIC	GROUP LESSONS ADVANCES	PRIVATE TRAINING LESSONS
OBEDIENCE TITLES/AWARDS _____		

RATE YOUR DOG'S ENERGY LEVEL "1" BEING VERY MELLOW TO "10" BEING A TOTAL UNCONTROLLABLE SPAZ _____

RATE YOUR DOG'S KNOWLEDGE AND RESPONSE TO THE FOLLOWING BASIC COMMANDS (0-5):

COMMAND	KNOWLEDGE	RESPONDS WELL
SIT	0 1 2 3 4 5	0 1 2 3 4 5
DOWN	0 1 2 3 4 5	0 1 2 3 4 5
SIT/STAY	0 1 2 3 4 5	0 1 2 3 4 5
DOWN/STAY	0 1 2 3 4 5	0 1 2 3 4 5
COME	0 1 2 3 4 5	0 1 2 3 4 5

WHAT IS THE MAIN REASON YOU HAVE CHOSEN DOGGIE DAYCARE FOR YOUR DOG _____

DATE _____ OWNER NAME _____ PET'S NAME _____

DOES YOUR DOG GET ALONG WITH OTHER DOGS _____

DOES YOUR DOG PLAY WELL WITH OTHER DOGS **IT DOES NOT KNOW** _____

HAS YOUR DOG EVER GROWLED AT ANYONE _____ WHAT WERE CIRCUMSTANCES _____

HAS YOUR DOG EVER BITTEN ANOTHER DOG OR PERSON _____

DOES YOUR DOG GROWL OR SNAP WHEN FOOD OR TOYS ARE TAKEN AWAY _____

DOES YOUR DOG GROWL OR SNAP FOR ANY OTHER REASON _____

IF YOUR DOG HAD SOMETHING IN HIS MOUTH YOU DID NOT WANT HIM TO HAVE, WOULD HE DROP OBJECT IF ASKED OR WILL HE LET YOU TAKE IT FROM HIM: YES NO HAVE YOU EVER TRIED TO TAKE FOOD/TOYS AWAY FROM YOUR DOG _____

WHAT HAPPENS _____

HOW DOES YOUR PET REACT WHEN VISITORS/STRANGERS APPROACH HOME/YARD _____

HOW DOES YOUR DOG REACT WHEN DOGS APPROACH HOME/YARD _____

HAS YOUR DOG EVER GROWLED, SNAPPED OR LUNGED AT ANYONE PASSING BY YOUR CAR / HOME / YARD _____

DOES YOUR DOG HAVE ANY PROBLEM IN THE FOLLOWING AREAS (CIRCLE ALL THAT APPLY):

MOUTHING CHEWING BARKING HOUSEBREAKING BOLTING OUT DOORWAYS

IS YOUR DOG AFRAID OF ANY TYPES OF DOGS _____

IS YOUR DOG FRIGHTENED OF ANY NOISES _____

IS THIS DOG (PLEASE CIRCLE ALL THAT APPLY):

ALLOWED TO RUN FREE IN THE HOME: SUPERVISED UNSUPERVISED
ALLOWED TO RUN IN A FENCED YARD: SUPERVISED UNSUPERVISED
LEASH WALK ONLY

HAS YOUR DOG EVER CLIMED OR JUMPED A FENCE _____

IS YOUR DOG CRATE CONTAINED / OK IN A CRATE _____

IS YOUR DOG SENSITIVE ABOUT ANY PARTS OF HIS BODY (I.E. TAIL TOUCHED, PAWS TOUCHED, ETC.) _____

DOES YOUR DOG LIKE TO BE BRUSHED _____ DOES YOUR DOG LIKE TO PLAY IN WATER _____

DOES YOUR DOG PLAY WITH TOYS _____ FAVORITE TOYS? OR TOYS YOUR DOG CAN'T HAVE?

CAN / DOES YOUR DOG CHEW BONES _____ FAVORITE BONES? OR BONES YOUR DOG CAN'T HAVE?

ARE THERE ANY OTHER ISSUES YOU WISH TO DISCUSS OR FEEL YOU SHOULD INFORM US OF, AND HOW MUCH OF A PROBLEM DO YOU CONSIDER THE BEHAVIOR TO BE:

ISSUE VERY SERIOUS SERIOUS NOT SERIOUS

1. _____

2. _____

3. _____

DATE _____ OWNER NAME _____ PET'S NAME _____

TERMS AND CONDITIONS

AGREEMENT: ALL DOGS ARE CARED FOR BY JUST HAPPY HOUNDS, LLC, ITS OWNERS, STAFF OR VOLUNTEERS WITHOUT LIABILITY ON THEIR PART FOR LOSS OR DAMAGE FROM DISEASE, DEATH, RUNNING AWAY, THEFT, FIRE, INJURY TO PERSONS, TO OTHER DOGS, OR PROPERTY BY SAID DOG, OR OTHER UNAVOIDABLE CAUSES, DUE DILIGENCE AND CARE HAVE BEEN EXERCISED. I UNDERSTAND THAT I AM SOLELY FINANCIALLY RESPONSIBLE FOR ANY DAMAGE OR HARM CAUSED BY MY DOG(S) WHILE UNDER THE CARE OF JUST HAPPY HOUNDS, LLC. I AGREE THAT IN ADMITTING MY DOG(S) TO JUST HAPPY HOUNDS, LLC, THEY HAVE RELIED ON MY REPRESENTATION THAT MY DOG(S) IS/ARE IN GOOD HEALTH AND HAS/HAVE NOT HARMED OR SHOWN AGGRESSION OR THREATENING BEHAVIOR TOWARDS ANY PERSON OR ANY OTHER DOG. IF MY DOG BECOMES INJURED OR ILL, JUST HAPPY HOUNDS, LLC SHALL HAVE THE RIGHT TO CALL A VETERINARIAN, AS DESIGNATED IN THIS AGREEMENT, OR TO CALL A VETERINARIAN OF THEIR CHOICE, OR TO ADMINISTER MEDICINE OR GIVE OTHER ADVISABLE ATTENTION, WITHIN THEIR DISCRETION AND JUDGEMENT, AND SUCH EXPENSES, BEING REASONABLE IN AMOUNT, SHALL BE PAID PROMPTLY BY ME, THE OWNER OF THE DOG. IF MY DOG CANNOT SAFELY ADAPT TO THE GROUP DAYCARE, JUST HAPPY HOUNDS, LLC SHALL HAVE THE RIGHT TO PLACE MY DOG IN A TRADITIONAL KENNEL.

PLEASE INITIAL BY EACH STATEMENT

1 ____ **DAYCARE STATUS:** PLEASE LET US KNOW WHETHER YOU WANT YOUR DOG TO BE A “REGULAR” OR A “DROP-IN” – A “REGULAR” IS A DOG THAT COMES TO A DAY OF DAYCARE ON A REGULAR BASIS, THEY ATTEND THAT DAY EVERY WEEK AND YOU DO NOT NEED TO CALL TO SCHEDULE A VISIT. A “DROP-IN” IS A DOG THAT THE OWNER ONLY BRINGS THEM ONCE IN A WHILE AND HAS TO CALL AHEAD TO SCHEDULE THEIR DAYCARE VISIT.

2 ____ **CANCELLATION POLICY:** IF YOUR DOG IS SCHEDULED TO ATTEND DAYCARE AND CANNOT ATTEND, PLEASE GIVE AS MUCH NOTICE AS POSSIBLE – THE EARLIER NOTICE THE BETTER SO WE MAY LET DROP-INS FILL YOUR DOG’S SPOT. A 24-HOUR NOTICE IS REQUIRED FOR CANCELLATIONS. IF YOU DO NOT GIVE THIS 24 HOUR NOTICE OR DO NOT CALL AT ALL TO CANCEL YOU WILL BE CHARGED A \$5 FEE ON YOUR NEXT VISIT. WE WILL MAKE EXCEPTIONS TO THIS WITH EMERGENCIES OR SITUATIONS THAT ARE OUT OF YOUR CONTROL, LIKE WAKING UP SICK OR TO A SICK DOG. BOARDING RESERVATIONS REQUIRE A 24 HOUR NOTICE FOR CANCELLATION. HOLIDAY WEEKS REQUIRE 72 HOUR BOARDING CANCELLATION NOTICE. IF YOU DO NOT GIVE A 24 HOUR NOTICE OR 72 HOUR NOTICE ON HOLIDAY WEEKS, YOU WILL BE BILLED ONE NIGHT STAY. KNOWING THE NUMBER OF DOGS ATTENDING HELPS US PLAN OUR STAFF SCHEDULES AND MAXIMIZE YOUR DOG’S EXPERIENCE AT JHH; THEREFORE, WE ASK YOUR COOPERATION.

3 ____ **DROP OFF AND PICK UP TIMES:** WE WOULD LIKE TO HAVE AN IDEA OF WHEN YOU ARE PLANNING DROP OFF AND PICK UP FOR YOUR DOG. DROP OFF TIME IS IMPORTANT FOR SCHEDULING ADEQUATE STAFF AND SCHEDULING TIMES FOR A NEW DOG TO COME IN. THE PICK UP TIME IS IMPORTANT FOR US WITH GROOMING (WE DO CLEAN UP THE DOGS BEFORE THEY GO HOME), WALKS AND POTTYING DOGS. WE KNOW THESE TIMES CAN VARY, BUT THE MORE INFORMATION YOU CAN GIVE US WILL HELP US PROVIDE THE BEST POSSIBLE CARE FOR YOUR DOG.

4 ____ **POTTYING DOGS BEFORE DROP-OFF:** PLEASE POTTY YOUR DOG OUTSIDE BEFORE YOU BRING THEM INTO THE BUILDING. IF YOU ARE RUNNING TIGHT ON TIME AND CAN’T, NO PROBLEM, THEN PLEASE LET US KNOW TO TAKE THEM OUT WITHIN A SHORT TIME OF ARRIVAL.

5 ____ **FEES FOR PAYING PER VISIT:** I UNDERSTAND AND AGREE THAT I AM RESPONSIBLE FOR PAYMENT OF ALL FEES ASSOCIATED WITH MY DOG’S STAY AT JUST HAPPY HOUNDS, LLC, AS WELL AS FEES FOR URGENT MEDICAL CARE AS DESCRIBED IN THIS AGREEMENT. PER VISIT PAYING FEES ARE DUE ON THE DAY OF THE VISIT.

6 ____ **DOGS NOT REGULARLY EXERCISED** TO THE LEVEL OF ACTIVITY OF JUST HAPPY HOUNDS, LLC DAYCARE MAY HAVE SORE MUSCLES, SORE JOINTS AND FATIGUE. DOGS NOT EXPOSED TO MATTED SURFACES MAY EXPERIENCE SORE PAWS, BLISTERS OR RAW PADS.

7 ____ I GIVE PERMISSION FOR **MY DOG TO BE CO-MINGLED**. YES NO

8 ____ I AFFIRM THAT **MY DOG IS IN GOOD HEALTH**, HAS NOT INJURED A PERSON OR OTHER DOG, IS CURRENT IN INNOCULATIONS, AND IS NOT INFESTED WITH PARASITES.

9 ____ I AGREE THAT JHH WILL NOT BE HELD LIABLE FOR INJURY OR ILLNESS RESULTING FROM MY DOG’S PRESENCE AT JHH, INCLUDING, BUT NOT LIMITED TO NEGLECTED NAILS, ATTEMPTED ESCAPE, ROUGH PLAY, DOG FIGHTS, CHANGE IN DIET, OR SEPARATION ANXIETY.

10 ____ **POTENTIAL RISKS AT DAYCARE:** WHEN DOGS ARE PLAYING, CHASING BALLS, ROUGH HOUSING, THERE WILL ALWAYS BE THE CHANCE OF A DOG GETTING SCRATCHED, POKED, PUNCTURED BY A TOOTH FROM ANOTHER DOG. THERE IS NO WAY AROUND THIS WHEN DOGS ARE RUNNING FREE PLAYING TOGETHER. THE DOGS WILL ALSO GET WET FROM DOG SLOBBER AND THEN DIRTY FROM THE WETNESS. WE DO THE BEST WE CAN TO KEEP ALL DOGS SAFE WHILE PLAYING. WE WILL ALWAYS REPORT TO AN OWNER IF THERE WAS AN OBVIOUS INCIDENT WHERE A DOG GETS SCRATCHED OR PUNCTURED BY A TOOTH OR HURT IN ANY WAY DURING PLAY. IF WE MISS AN INCIDENT AND YOU NOTICE A MARK ON YOUR DOG, PLEASE LET US KNOW. HOWEVER, THERE IS LITTLE WE CAN DO TO STOP EVERY SCRATCH AND POKE, BUT WE CAN OBSERVE CLOSELY

WHO YOUR DOG IS PLAYING MOST WITH TO WATCH FOR ANY FUTURE PROBLEM. **KENNEL COUGH** IS A HIGHLY CONTAGIOUS RESPIRATORY

JHH ENROLLMENT APPLICATION—PAGE 5 OF 5

DATE _____ OWNER NAME _____ PET'S NAME _____

INFECTION THAT IS ALWAYS A POTENTIAL RISK FOR YOUR DOG WHEN INTERACTING WITH OTHER DOGS. THERE ARE MANY STRAINS OF KENNEL COUGH AND THE VACCINES DO NOT NECESSARILY PREVENT YOUR DOG FROM CONTRACTING IT. IT IS NOT LIFE THREATENING AND IS VERY SIMILAR TO CHILDREN CATCHING A COLD FROM OTHER CHILDREN IN DAYCARE.

11 _____ **LONG TOE NAILS** MAY CAUSE INJURY. YOU WILL BE NOTIFIED IF YOUR DOG'S NAILS ARE TOO LONG. IF, AT YOUR NEXT VISIT, THE NAILS HAVE NOT BEEN TRIMMED, JHH WILL TRIM THEM AT OWNER'S EXPENSE.

12 _____ **ANY BEHAVIOR DEEMED DANGEROUS** OR INAPPROPRIATE BY JHH MAY RESULT IN SEPARATION OF YOUR DOG FROM THE GROUP. THE DOG WILL STILL GET ACTIVITY, JUST SEPARATE FROM THE GROUP, AND MAY HAVE TO SPEND MORE TIME IN THE KENNEL THAN THE DOGS THAT PLAY WELL TOGETHER.

13 _____ **BEHAVIORS** THAT COULD CAUSE A DOG TO BE EXCUSED FROM DAYCARE: THE TWO MAIN ISSUES ARE, THAT OVER TIME, IF NOT RECTIFIED, MAY CAUSE A DOG TO BE EXCUSED, "MARKING" – INTENTIONAL PEEING IN THE BUILDING OR AGGRESSIVELY/OVERLY DOMINANT BEHAVIOR THAT BECOMES UNCONTROLLABLE. IF WE ARE HAVING THESE ISSUES WITH A DOG, WE WILL EXPLAIN THE ISSUE TO THE OWNER AND WE WILL TRY TO RESOLVE THEM SO THE DOG CAN CONTINUE TO ATTEND. IF THE PROBLEM DOESN'T GET BETTER OR WORSENS, THE OWNER WILL BE NOTIFIED AND THE DOG WILL NOT BE ABLE TO RETURN TO DAYCARE.

14 _____ I AGREE THAT **DOGS NOT REGULARLY SOCIALIZED** DO NOT NECESSARILY KNOW HOW TO BEHAVE PROPERLY WITH OTHER DOGS. THESE DOGS ARE AT A HIGHER RISK OF INCIDENTS INCLUDING, BUT NOT LIMITED TO, BITES, FIGHTS, FEAR AGGRESSION, OBJECT GUARDING, ACTING OUT AT OTHER DOGS.

15 _____ I UNDERSTAND AND ACKNOWLEDGE THAT THE **STAFF WILL SUPERVISE AND CORRECT** INAPPROPRIATE BEHAVIOR THAT MY DOG(S) MAY SHOW IN DAYCARE INCLUDING PROPERTY DESTRUCTION OR AGGRESSION ON THE PART OF MY DOG TOWARD HUMANS OR OTHER DOGS. BEHAVIORAL CORRECTIONS SUCH AS "TIME-OUTS", RESTRAINT, AND OTHER NON-LETHAL MEASURES MAY BE TAKEN TO PROTECT HUMANS, OTHER DOGS, AND MY PET.

16 _____ **ABANDONMENT**: SHOULD I NOT RETRIEVE MY DOG WITHIN FOURTEEN (14) DAYS OF THE PREDETERMINED PICK-UP DATE, AND HAVE NOT CONVEYED TO JHH THAT I WISH TO EXTEND A STAY, I UNDERSTAND THAT JHH WILL NOTIFY ME BY REGISTERED MAIL AT THE ADDRESS PROVIDED ON THIS DOCUMENT, GIVING NOTICE THAT ON THE TWENTY-FOURTH (24TH) DAY FOLLOWING THE ORIGINAL PICK-UP DATE, MY DOG WILL BE CONSIDERED ABANDONED, AND JHH WILL DELIVER IT TO AN APPROPRIATE RESCUE GROUP, OR THE LOCAL HUMANE SOCIETY.

17 _____ **I AGREE AND UNDERSTAND** THAT I, MY FAMILY AND ANY OTHER PERSON CLAIMING OWNERSHIP OF THIS DOG, HEREBY RELEASE JHH, ITS OWNERS, EMPLOYEES AND CONTRACTORS FROM LIABILITY FOR INJURY, LOSS OR DEATH OF MY DOG DURING AND AFTER JHH SERVICES ARE PROVIDED TO ME AND MY DOG.

18 _____ **PHOTOGRAPHY/VIDEO**: I UNDERSTAND AND AGREE THAT MY DOG AND/OR MYSELF MAY BE INCLUDED IN PHOTOGRAPHY OR VIDEOTAPING FROM TIME TO TIME AND GIVE PERMISSION FOR THIS MEDIA TO BE USED PERPETUALLY, EXCLUSIVELY AND FOR ALL MEDIA THROUGHOUT THE WORLD (INCLUDING PRINT, NON-THEATRICAL, VIDEO, CD-ROM, INTERNET AND ANY OTHER ELECTRONIC MEDIUM PRESENTLY IN EXISTENCE OR INVENTED IN THE FUTURE), THE RIGHT TO USE AND INCORPORATE (ALONE OR TOGETHER WITH OTHER MATERIALS), IN WHOLE OR IN PART, PHOTOGRAPHS OR VIDEO FOOTAGE TAKEN OF YOU AND YOUR PET AS A RESULT OF YOUR PARTICIPATION WITH JUST HAPPY HOUNDS, LLC. YOU HEREBY AGREE THAT YOU WILL NOT BRING OR CONSENT TO OTHERS BRINGING CLAIM OR ACTION AGAINST JHH ON THE GROUNDS THAT ANYTHING CONTAINED IN THE ADVERTISING AND PUBLICITY USED IN CONNECTION HEREWITH, IS DEFAMATORY, REFLECTS ADVERSELY ON YOU, VIOLATES ANY OTHER RIGHT WHATSOEVER, INCLUDING, WITHOUT LIMITATION, RIGHTS OF PRIVACY AND PUBLICITY. I HEREBY RELEASE JUST HAPPY HOUNDS, LLC, ITS OWNERS, OFFICERS, SUCCESSORS AND ASSIGNS FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, ACTIONS, CAUSES OF ACTIONS, SUITS, COSTS, EXPENSES, LIABILITIES, AND DAMAGES WHATSOEVER THAT YOU HAVE HEREAFTER HAVE AGAINST JHH IN CONNECTION WITH THE MARKETING MATERIALS.

19 _____ **IF THE WEATHER IS QUESTIONABLE**, CALL BEFORE YOU COME. A MESSAGE WILL BE ON THE VOICEMAIL BY 6:00 AM, IF DAYCARE IS CANCELLED. IF NO MESSAGE, WE WILL BE HERE. IF WEATHER TURNS BACK DURING THE DAY, WE WILL CALL YOUR NUMBER AND LET YOU KNOW IF WE NEED TO CLOSE EARLY.

NAME OF OWNER _____ SIGNATURE _____

WITNESS: _____ Date _____