



## NEW CLIENT ENROLMENT FORM

### CLIENT INFORMATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_

PROV. \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_

HOME \_\_\_\_\_

WORK \_\_\_\_\_

MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

### EMERGENCY CONTACT

NAME \_\_\_\_\_

RELATIONSHIP TO YOU \_\_\_\_\_

ADDRESS \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_

PROV. \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_

HOME \_\_\_\_\_

WORK \_\_\_\_\_

MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

### VETERINARIAN

NAME \_\_\_\_\_

CLINIC NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_

PROV. \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

### DOG INFORMATION

Name \_\_\_\_\_ Breed \_\_\_\_\_

Description / Colour \_\_\_\_\_

Sex  M  F Age \_\_\_\_\_ Birthday \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Spayed / Neutered  Y  N Dog Tags \_\_\_\_\_

Microchip / Tattoo Details \_\_\_\_\_

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

Where did you get your dog? \_\_\_\_\_

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## HEALTH INFORMATION

What is your dog's general physical condition? \_\_\_\_\_

Does your dog have any medical conditions? **Y** **N**

If yes, please explain: \_\_\_\_\_

Does your dog have hip dysplasia or arthritis? \_\_\_\_\_

Any restrictions on activities? \_\_\_\_\_

Is your dog prone to any allergies (food, environmental, etc.)? \_\_\_\_\_

Does your dog have a history of eye, ear, or skin infections? \_\_\_\_\_

Has your dog ever had hot spots? \_\_\_\_\_

Is your dog on any medication? **Y** **N**

If yes, please name the medication and their purpose(s): \_\_\_\_\_

Is your dog on a flea/tick program? \_\_\_\_\_

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## FEEDING INFORMATION

How is your dog's appetite? \_\_\_\_\_

How often does your dog eat? \_\_\_\_\_ Do you leave food out of all the time? **Y** **N**

What brand does your dog eat? \_\_\_\_\_ Amount per serving? \_\_\_\_\_

Do you add any supplements to your dog's food? \_\_\_\_\_

Are there any treats your dog may not have? \_\_\_\_\_

Does your dog have any unusual eating habits? \_\_\_\_\_

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## GROOMING INFORMATION

Does your dog like to be brushed? **Y** **N** Does your dog require frequent brushing? **Y** **N**

How does your dog react to having her nails trimmed? \_\_\_\_\_

How does your dog react to bathing? \_\_\_\_\_

Has your dog ever had a skin reaction to certain types of shampoo or other grooming products? **Y** **N**

If yes, please explain: \_\_\_\_\_

Do you take your dog to a groomer? **Y** **N** If so, how often? \_\_\_\_\_

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## TRAINING + BEHAVIOURAL INFORMATION

Has your dog had formal obedience training? **Y** **N**

When? \_\_\_\_\_ With whom? \_\_\_\_\_

What commands does your dog obey? \_\_\_\_\_

Has your dog been crate trained? **Y** **N**

What is your dog's general temperament? \_\_\_\_\_

Has your dog attended a daycare or dog park before? \_\_\_\_\_

Has your dog ever been in a fight? **Y** **N**

If yes, what were the circumstances? \_\_\_\_\_

Does your dog play with other dogs regularly? **Y** **N**

Does your dog's behaviour around others depend on the size, breed, or sex of other dogs?

\_\_\_\_\_

How does your dog react when encountering another dog? \_\_\_\_\_

Has your dog ever had any behavioural problems either while you were away or upon your return? **Y** **N**

If yes, please explain: \_\_\_\_\_

Where is your dog when you are not at home? \_\_\_\_\_

Has your dog ever run away for any reason? **Y** **N**

If yes, please explain: \_\_\_\_\_

Does your dog have any fears? **Y** **N**

If yes, please provide details: \_\_\_\_\_

How does your dog react to a stranger entering your home? \_\_\_\_\_

Has your dog ever bitten a person before? **Y** **N**

If yes, please explain the circumstances: \_\_\_\_\_

Does your dog like children? **Y** **N**

Does your dog display any resource guarding behaviour? **Y** **N**

If yes, please explain: \_\_\_\_\_

Does your dog have any problems in the following areas:

- |   |  |   |
|---|--|---|
| <input type="radio"/> BARKING             | <input type="radio"/> DIGGING                  | <input type="radio"/> MOUTHING                    |
| <input type="radio"/> DESTRUCTIVE CHEWING | <input type="radio"/> INGESTING NON FOOD ITEMS | <input type="radio"/> NERVOUSNESS                 |
| <input type="radio"/> IGNORING COMMANDS   | <input type="radio"/> JUMPING UP ON PEOPLE     | <input type="radio"/> CHASING RUNNERS OR CYCLISTS |
| <input type="radio"/> SEPARATION ANXIETY  |  |   |

When is the last time your dog had an "accident" in the house? \_\_\_\_\_

Why? \_\_\_\_\_

How are your dog's car manners? \_\_\_\_\_

Are they comfortable in a more confined setting with other dogs? **Y** **N**

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## **PLAY TIME + WALKING INFORMATION**

What kind of collar or harness do you use when you walk your dog? \_\_\_\_\_

When walking your dog on leash, what concerns, if any, do you have (i.e. pulling on leash, picking up garbage, leash reactivity, etc.)? \_\_\_\_\_

How would you describe your dog's energy level? \_\_\_\_\_

How often do you walk your dog? \_\_\_\_\_

Do you allow your dog off-leash? **Y** **N**

If yes, are there any concerns to be aware of when your dog is off-leash (i.e. prey drive, poop eating, resource guarding, etc.)? \_\_\_\_\_

How is your dog's recall when off-leash? \_\_\_\_\_

What is your dog's favourite activity at the park? \_\_\_\_\_

What kinds of toys does your dog like to play with? \_\_\_\_\_

Does your dog like to swim? **Y** **N**

Is it permissible for your dog to have playtime access to water/splash pool areas as they may get dirty/muddy? **Y** **N**

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## **SLEEPING INFORMATION**

Where does your dog sleep at night? \_\_\_\_\_

What does your dog sleep on? \_\_\_\_\_

Has your dog ever been left overnight before? **Y** **N**

Is your dog allowed on the furniture at home? **Y** **N**

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## **ADDITIONAL INFORMATION**

How did you hear about Uberdog? \_\_\_\_\_

Do you or your dog have an Instagram account? **Y** **N** Handle: \_\_\_\_\_

If so, share it so we can tag you through our own account: @uberdoginc



## VETERINARIAN CLEARANCE FORMS

Dog Owner's Name \_\_\_\_\_ Dog's Name \_\_\_\_\_  
 Breed \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Veterinarian \_\_\_\_\_ Clinic \_\_\_\_\_

Dear Doctor:

I would like my dog to use Uberdog's boarding services and/or to participate in Uberdog's canine exercise activities. Please provide them with the following information, by scanning and emailing this form to *info@uberdog.ca* at your earliest convenience.

Thank you.

Sincerely,

\_\_\_\_\_  
SIGNATURE OF OWNER

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### VACCINATION

### DATE ADMINISTERED

Rabies _____	_____
DHPP _____	_____
Bordetella _____	_____
Parvovirus _____	_____
Flea Prevention Program _____	_____

Other medical information Uberdog should know about my dog:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF VETERINARIAN

\_\_\_\_\_  
DATE

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Uberdog The Midtown • 49 Research Road, Toronto ON M4G 2G8 Tel:  
416 421 2040 • *info@uberdog.ca* • *uberdog.ca*



## CUSTOMER AGREEMENT

1. Uberdog Inc. agrees to exercise due diligence in the care of my dog. In addition, Uberdog Inc. agrees to keep its premises clean and sanitary. My dog will be cared for by Uberdog staff only, without liability on Uberdog's part for loss or damage from disease, theft, fire, death, escape, injury or harm to persons, other dogs or property by my dog, due diligence and care having been exercised by Uberdog.
2. I agree to pay the boarding rate in effect on the date my dog is checked into the Uberdog boarding service and to pay all costs and charges for special services requested. These costs shall be payable upon the pickup of my dog or the drop off of my dog at my home or when billed by Uberdog.
3. I agree to pay the rate in effect for any exercise or other services when billed by Uberdog.
4. I understand that I am solely financially responsible for any damage or harm caused by my dog while under the care of Uberdog.
5. Should my dog become ill or seem to be in need of medical attention, Uberdog in its sole discretion, reserves the right to administer aid and/or to engage the services of any available veterinarian. I shall pay any expenses incurred as a result of this medical attention.
6. My dog is in good general health and valid proof that he/she is current on Rabies, DHPP, Bordetella and Parvovirus vaccinations will be provided before he/she can stay at the Uberdog Ranch. In addition my dog is on a scheduled flea/tick prevention program. Dogs arriving with fleas and/or ticks will be bathed at owner's expense.
7. Should my dog exhibit inappropriate aggressive behaviour toward other dogs or people, for the safety of all concerned, he/she will be placed in a secure dog run separate from other dogs.
8. Uberdog reserves the right to refuse any dog.
9. I have read and understood the terms above.

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**SIGNATURE OF THE OWNER**

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**PRINTED NAME OF THE OWNER**

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**DOG'S NAME**

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**DATE**

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**SAVE or SCAN**  
the completed form

email as an  
**ATTACHMENT**  
to [info@uberdog.ca](mailto:info@uberdog.ca)

**QUESTIONS?**  
Call **416 421 2040**