



Drop off Date: \_\_\_\_\_ Pick Up Date: \_\_\_\_\_

## **Board & Train Application**

### **OWNER'S INFORMATION:**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Emergency Contact (Other than self): \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
Please List Other Persons Authorized to Pick Up Your Dog: \_\_\_\_\_  
How Did You Hear About Alpha K9 U? \_\_\_\_\_

### **DOG'S INFORMATION (GENERAL):**

Dog's Name: \_\_\_\_\_ Call Name: \_\_\_\_\_ Colors/Markings: \_\_\_\_\_  
Breed: \_\_\_\_\_ Sex: Male / Female Spayed/Neutered: ☐ Yes ☐ No  
Birthdate: \_\_\_\_\_ How long have you owned dog: \_\_\_\_\_  
Where did you get your dog: ☐ Breeder ☐ Shelter ☐ Pet Store ☐ other \_\_\_\_\_  
Has your dog ever attended a boarding facility: ☐ Yes ☐ No If yes, where: \_\_\_\_\_

### **Pet's Health Record (must be accompanied by veterinarian records):**

What Vet do you use: \_\_\_\_\_ Phone: \_\_\_\_\_  
Do you use Flea/Tick Preventative: ☐ Yes ☐ No Last Given: \_\_\_\_\_  
Is your dog currently on any medications: ☐ Yes ☐ No  
If yes, what medications: \_\_\_\_\_  
Any known allergies, medical problems or restrictions: \_\_\_\_\_

### **Feeding Instructions:**

Will you be supplying the food/treats: ☐ Yes ☐ No What food do you feed: \_\_\_\_\_  
When do you feed: ☐ AM ☐ Mid-day ☐ PM ☐ Both  
How much do you feed at each feeding: ☐ 1/2 cup ☐ 1 cup ☐ 2 cups ☐ other \_\_\_\_\_  
Describe your dog's feeding habits: ☐ finicky ☐ Good Appetite ☐ Over Indulges  
Treats: \_\_\_\_\_ Foods to Avoid: \_\_\_\_\_  
Special Feeding Instructions: \_\_\_\_\_

### **Walks:**

Please describe your leash: \_\_\_\_\_  
Do you use any training collars: ☐ Yes ☐ No If Yes, what type: \_\_\_\_\_  
Any issues: \_\_\_\_\_

### **Playtime:**

Will you be supplying any toys for your dog: ☐ Yes ☐ No  
What are your dog's favorite toys: \_\_\_\_\_  
Does your dog have toy drive: ☐ Yes ☐ No  
If yes, please describe: \_\_\_\_\_  
Is your dog possessive of these toys: ☐ Yes ☐ No  
If yes, please list and describe: \_\_\_\_\_

Are there any special games your dog enjoys: ☐ Yes ☐ No

Please list and describe: \_\_\_\_\_

How often is your dog exercised: \_\_\_\_\_

How long? More than.... ☐ 15 min ☐ 30 min ☐ 1 hour ☐ 2 hours

### **Personality**

Is it okay for your dog to play with other animals: ☐ Yes ☐ No

If no, please explain why: \_\_\_\_\_

Does your dog socialize/play with other dogs on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Please Describe: \_\_\_\_\_

Has your dog shown any aggression toward other animals or people: ☐ Yes ☐ No

If yes, please describe: \_\_\_\_\_

Has your dog ever bitten or been bitten: ☐ Yes ☐ No

If yes, please describe: \_\_\_\_\_

Describe how your dog reacts to guests and/or strangers: \_\_\_\_\_

### **Describe Your Dog's Personality (mark all that applies):**

Mellow/calm \_\_\_\_\_ Shy/Submissive \_\_\_\_\_ Playful \_\_\_\_\_ High Energy \_\_\_\_\_

Dominant/Alpha \_\_\_\_\_ Well Behaved \_\_\_\_\_ Unruly \_\_\_\_\_

Please Mark All That Apply to Your Dog:

Food Possessive: \_\_\_\_\_

Jumps Up On People: \_\_\_\_\_

Mouthy / Bites: \_\_\_\_\_

Digs: \_\_\_\_\_

Eats Feces: \_\_\_\_\_

Eats Rocks: \_\_\_\_\_

High Strung: \_\_\_\_\_

Jumps Fences: \_\_\_\_\_

Destroys Furniture: \_\_\_\_\_

Toy Possessive: \_\_\_\_\_

Barks Excessively: \_\_\_\_\_

Chews Excessively: \_\_\_\_\_

Separation Anxiety: \_\_\_\_\_

Does Not Obey: \_\_\_\_\_

Fear of Loud Noises: \_\_\_\_\_

Timid: \_\_\_\_\_

Growls at Strangers: \_\_\_\_\_

Destroys Toys/clothing: \_\_\_\_\_

What commands does your dog know (Please List): \_\_\_\_\_

Is your dog house trained: ☐ Yes ☐ No

Is your dog crate trained: ☐ Yes ☐ No

What is your dog's potty command: \_\_\_\_\_

Does your dog get on Furniture with you or a family member: ☐ Yes ☐ No

What do you consider your dog's most undesirable behavior: \_\_\_\_\_

What do you do to correct your dog's behavior problems: \_\_\_\_\_

Has your dog ever been to Obedience School: ☐ Private ☐ Group ☐ Board & Train

What training facility or professional trainer/behaviorist did you use: \_\_\_\_\_

Briefly describe your impressions and benefits from training: \_\_\_\_\_

**Grooming:**

How is your dog for having nails done: \_\_\_\_\_

Do you or your groomer have problems bathing or grooming your dog: ☐ Yes ☐ No

Any allergies to grooming products: \_\_\_\_\_

Any history groomer should be made aware of: \_\_\_\_\_

**Sleep time:**

Will you be providing the bedding for your dog during their stay: ☐ Yes ☐ No

If yes, please describe: \_\_\_\_\_

Anything else we should know: \_\_\_\_\_

***To the best of my knowledge, the information that I have provided is both accurate and true. I also acknowledge that I have read, understand, and agree to abide by the Policies and Procedures attached hereto.***

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Name (Please Print): \_\_\_\_\_

**Vaccination Policy:** All canine guests must have hard copy documentation (from a veterinarian) of up-to-date vaccinations and annual laboratory results of a negative fecal in order to enter the Alpha K9 U premises, at any time, for any reason (including tours). Alpha K9 U requires Rabies, DHPP (Distemper, Hepatitis, Parainfluenza, Parvovirus), Bordetella, and a negative fecal float. Puppies are required to have their second set of DHPP and Bordetella vaccinations, and are required to have their Rabies vaccination (at 16 weeks of age).

In addition, please allow a minimum of 48 hours after receiving vaccinations such as Distemper and/or Rabies and up to 14 days after receiving a Bordetella vaccine before entry. If the Bordetella vaccine has never been given, has expired, or was given intranasal (drops in the nose), it must be administered AT LEAST FOURTEEN (14) DAYS prior to arrival at Alpha K9 U, no exceptions! If the Bordetella vaccine is being boosted a minimum of FIVE (5) days is required before entry.