

HappyDogz Daycare  
(HappyTailz of Madison, Inc.)  
Application



**Owner Information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home/ Cell Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Email Address

**Pet Information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Breed

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Age

\_\_\_\_\_  
Is your pet spayed or neutered? Y N

\_\_\_\_\_  
Allergies

\_\_\_\_\_  
Medications taken

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

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

\_\_\_\_\_  
Can your dog have treats? Y N

**Veterinarian**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Clinic

\_\_\_\_\_  
Address (if not a Madison area clinic)

\_\_\_\_\_  
Phone (if not Madison area clinic)

**My dog will be attending (Please circle one):**

Fitchburg

Middleton

Both Locations

**Emergency contact** (in case we are unable to contact you)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Relation

**Where did you hear about us?** \_\_\_\_\_

**Why are you interested in daycare for your dog?** \_\_\_\_\_

**Please describe your dog's personality or any issues he/she might have.**

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

HappyDogz  
(HappyTailz of Madison, Inc.)

**Health and Temperament Certification**

I, \_\_\_\_\_, hereby certify that my dog(s),  
\_\_\_\_\_ are in good health and have had no communicable diseases in the last 30 days.

I further certify that my dog(s) have not bitten, harmed or shown any threatening behavior towards any person or animal.

Vaccinations:

Vaccination	Expiration Date
Bordatella (Kennel Cough Vaccine)	
DHLPP	
Rabies	

By signing this, I certify that all the above information is true to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE BRING OR FAX UP-TO-DATE VACCINATION RECORDS  
TO US BEFORE OR ON THE DUE DATES! THANK YOU!**

HappyDogz  
(HappyTailz of Madison, Inc.)  
**Agreement**

1. I understand HappyTailz of Madison, Inc. cannot be held responsible for any injury incurred by my dog(s) if not due to staff negligence.
2. I understand that I am solely responsible for any injury incurred by my dog(s) or any damages or injuries caused by my dog(s) while in the HappyDogz facility.
3. I certify that my dog is in good health with no communicable diseases and that my dog is being admitted based on this representation.
4. I certify that my dog has never harmed or threatened anyone or any animal and that my dog is being admitted based on this representation.
5. I further understand and agree that HappyDogz and their staff are not liable for any problems that might develop provided reasonable care and precautions are followed, and I hereby release them of liability of any kind whatsoever arising from my dog(s) use of the HappyDogz facility.
6. I further understand and agree that any problem that develops with my dog(s) will be treated as deemed best by HappyDogz, in their sole decision, and assume all financial responsibility for all expenses incurred.

**I certify that I have read and understand all the regulations set forth preceding this and that I have read and understand this agreement. I agree to abide by the regulations, and accept all the terms, conditions, and statements of this agreement and the information packet.**

**Name(s) of Dog(s)**

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date