

# Oscar's Pet Resort Boarding Application

Please submit one application for each dog

Please have your veterinarian fax us a copy of your pet's current vaccinations to (717) 397-0731 or bring a copy with you. We must have veterinarian letterhead on the vaccination schedule. We require Rabies, Distemper and Bordetella.

## Can any dog stay and play:

- Dogs four months and older
- Friendly dogs that are not food, toy, or space aggressive
- ALL dogs must come in for interview prior to acceptance to Oscar's Pet Resort (trial day)
- Healthy Dogs - ALL dogs must have current DHPP, Rabies and Bordetella vaccinations and proof from veterinarian.
- Any dog older than a year of age **MUST** be spayed or neutered

**\$40.00 application fee applied at your dog(s) "Observation day" (\$25 for each additional dog being assessed the same day.) Fees are applied whether dog is approved for services or not.**

## Contact Information

Parent's Name(s):		Today's Date
Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	Cell Provider:
Email:		
Best way to reach you:		
Veterinarian Office:		
Veterinarian Phone Number:		
Primary Emergency Contact: <i>(List someone other than yourself or spouse)</i>		
Relationship:	Phone Number:	

# Your Dog

Please submit one application for each dog.

Dog's Name:		Breed: (If a mix, list two predominant breeds)	
Date of Birth:		Current Age:	
Color:	Weight:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Neutered/Spayed?			
How long have you owned your dog?			
Which of the following best describes your dog's level of socialization with other dogs: <input type="checkbox"/> None – No knowledge of other dog interaction <input type="checkbox"/> Minimal – On leash encounters only <input type="checkbox"/> Moderate – Some off-leash playtime on occasion with visitor's/neighbor's/friend's dog(s) <input type="checkbox"/> Extensive – Regular visits to dog social events, off-leash dog parks, dog daycare, etc.			
Is your dog crate trained?		What does your dog sleep on? <input type="checkbox"/> Crate <input type="checkbox"/> Owner's Bed <input type="checkbox"/> Dog Cushion/Bed on floor <input type="checkbox"/> Other:	
Has your dog had any obedience training? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what level:			
Which commands does your dog know? (please check all that apply) <input type="checkbox"/> Sit <input type="checkbox"/> Stay <input type="checkbox"/> Down <input type="checkbox"/> Come <input type="checkbox"/> Heel <input type="checkbox"/> Leave it <input type="checkbox"/> Rollover <input type="checkbox"/> Kisses <input type="checkbox"/> High Five <input type="checkbox"/> Other: _____			
Is your dog comfortable having his/her feet touched? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:			
Is your dog comfortable having his/her collar taken on/off? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:			
Has your dog ever bitten a person? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			
Has your dog ever climbed/jumped a fence? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain and how high was the fence:			
Does your dog play with any toys? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what kinds of toys:			
Has your dog ever growled or snapped at a person who has taken food or toys away from them? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			
Other comments or information about you dog that you fell might be helpful?			

# Health History

Does your dog have any physical disabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain disability & cause:
If yes, what restrictions need to be placed on your dog's activities or movements? <input type="checkbox"/> No jumping <input type="checkbox"/> No running <input type="checkbox"/> No hard play <input type="checkbox"/> No contact with other dogs <input type="checkbox"/> Other ( <i>please explain</i> )
Does your dog have any medical conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:
If medication is used to control the condition, please provide name and dosage.
Provide details of your dog's diet: <ul style="list-style-type: none"><li>• Type (kibble, canned, raw/natural):</li><li>• Brand (Iams, Blue Buffalo, Purina, etc.):</li><li>• Feeding Schedule:</li></ul>
Does your dog have any allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details:
Does your dog have any dietary restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list:

We will be happy to provide our "house" food to your dog (\$2 a serving); however, sudden food changes can result in stomach upsets, so please bring food for your dog. With medications and food, please bring enough for your pet's stay plus a few days extra in case of emergency or fun extended stay. Please pre-measure all food for each meal to ensure we get the correct amount (i.e. if your pet is served 1 cup each meal, place 1 cup serving in a zip-lock bag).

## Terms & Conditions

- I agree to providing Oscar's Pet Resort a complete and accurate history of my dog's temperament, details of an aggressive displays, and social development.
- I agree to provide Oscar's Pet Resort the required current vaccination schedule for my dog.
- I agree to reading the General Policies before my dog attends Oscar's Pet Resort.
- I am aware of a \$40 application fee (\$25 for each additional dog) that is collected at the time of the Observation Day. The application fee will include my dog's introduction to the OPR facilities, greeting with other dog(s), and a report of my dog's temperament, obedience, and social observations.