

Doggy Daycare Application Form

Your Name:

Address:

City

State

ZIP Code

Day Phone

Evening Phone

Social Security #

Dog Information

Dog Breed

Circle One: **Male** **Female**

Dog Weight

Dog Likes: (check all that apply)

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Frisbee | <input type="checkbox"/> Tennis Balls |
| <input type="checkbox"/> Fetch | <input type="checkbox"/> Running |
| <input type="checkbox"/> Tug of War | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Chasing Squirrels |

Signature

I, hereby release all liability.

Payment Info

Please enclose a check payable to Doggy Daycare for \$100 per day per dog. Mail check along with this application to the following address:

Doggy Daycare
101 Main Street
Your City, CA 99999