Dog's Name: _____

Land of OZ – Maui LLC

Application

THE FOLLOWING ITEMS MUST BE PROVIDED PRIOR TO THE TEMPERAMENT TEST	Land of OZ use only
Current vaccinations record	
Current Bordetella (Kennel Cough) vaccination record	
Current flea/tick and heartworm treatment record	
Any existing medical condition(s) or clearance of no medical conditions	
Spay/Neuter record	
$20.00 temperament test fee	

OWNER INFORMATION				Land of OZ use only
Name:		Name:		
Address:		Address:		
City, St, Zip:		City, St, Zip:		
Mobil Phone:		Mobil Phone:		
Work Phone:		Work Phone:		
Home Phone:		Home Phone:		
Email:		Email:		
Notes:				

EMERGENCY CONTACT INFORMATION Someone you trust making decisions about your dog in case you can't be reached.				Land of OZ use only
Name:		Name:		
Address:		Address:		
City, St, Zip:		City, St, Zip:		
Mobile Phone:		Mobil Phone:		
Work Phone:		Work Phone:		
Home Phone:		Home Phone:		
Email:		Email:		
Notes:				

VETERINARY INFORMATION		Land of OZ use only
Company Name:		
Veterinarian Name:		
Address:		
City, State, Zip:		
Work Phone:		
Additional Phone:		
Emergency Phone:		
Email:		
Notes:		

Dog's Name: _____

GENERAL INFORMATION		Land of OZ use only
What is your dog's name?		
What breed(s) is your dog?		
Sex (Male or Female)?		
Date of birth or approx. age?		
Color?		
Any identifying marks?		

MEDICAL HISTORY / MEDICATIONS / SPECIAL DIET		Land of OZ use only
Please give as much details as possible.		
Does your dog have a microchip?		
Provide number:		
Has your dog ever had a seizure?		
Does your dog have hip dysplasia?		
Has your dog broken any bones?		
Has your dog had any back, neck, leg injuries?		
Has your dog ever had Bordetella (Kennel Cough)?		
Does your dog have allergies?		
Does your dog have any lumps or scars?		
What food does your dog eat?		
Any dietary restrictions?		
Has your dog been sick in the past thirty days?		
What type of flea control is your dog on?		
What type of tick control is your dog on?		
What type of heart worm control is your dog on?		
Any medical conditions?		
Describe in detail:		
Is your dog on any medications?		
Name of Medication:		
Reason for Use:		
Times per Day:		
At what age was your dog spayed/neutered?		

Dog's Name: _____

TELL US ABOUT YOUR DOG		Land of OZ use only
Please give as much details as possible.		
How and where did you get your dog?		
If a rescue dog, what do you know about its past?		
How old was your dog when it came to your home?		
How active is your dog?		
Tell us about the activities that you do with your dog?		
Do you and your dog walk together?		
How often?		
Where?		
How many hours a day does your dog currently spend alone?		
What type of area? Example: crate, tied up, loose in the house or yard		
During that time is there any destructive behavior?		
Does your dog like to be brushed?		
Does your dog like to take a bath?		
Does your dog mind getting its feet wet?		
Do you brush your dog's teeth?		
Does your dog have any sensitive areas on its body?		
Does your dog have toys?		
How many dogs are at home? If more then 1, how does this dog act if the other dog(s) leave?		
How does your dog react to puppies?		
How does your dog react to small dogs?		
How does your dog react to large dogs?		
Does your dog visit or go to:		
The beach:		
A dog park:		
Other daycare:		
How did your dog react in each environment?		

Dog's Name: _____

TELL US ABOUT YOUR DOG		Land of OZ use only
Is your dog afraid of any noises?		
Is there a type of person that your dog is afraid of?		
Does your dog like children?		
Does your dog exhibit protective behavior?		
Has your dog ever growled or snapped at anyone taking away food or toys?		
Has your dog ever bitten a person or animal resulting in injury or death?		
Has your dog ever been in a dog fight?		
Has your dog ever been in a dog fight that resulted in injuries?		
Does your dog use his mouth too rough on you when you're playing?		
Does your dog dig? How much?		
Does your dog have a barking problem?		
Has your dog ever climbed a six foot fence?		
Is your dog an escape artist?		
Has your dog had any training?		
What type and with who?		

HOW DID YOU HEAR ABOUT LAND OF OZ - MAUI		Land of OZ use only
Friend Web site Flyer Radio Newspaper Vet Trainer		
☐ ☐ ☐ ☐ ☐ ☐ ☐		

Ask us about our "Refer a Friend" program