Let's Practice 1520 G Avenue Plano TX 75074 972.578.9800 www.letspractice.com

## LET'S PRACTICE DOG DAYCARE RULES & REGULATIONS

The purpose of our dog daycare program at Let's Practice is to provide a safe, fun, and stimulating social environment for dogs during weekday business hours. To ensure the safety of your dog and the other guests, we require all dogs and their owners to comply with the following Rules and Regulations.

AGE: All dogs must be at least 3-months-old.

SEX: All dogs except: females in season, unneutered males over 7-months-old, and males that consistently mark new territory.

SHOTS: All dogs must have up-to-date vaccinations. The owner must submit written proof that its dog has received vaccinations within the last 7 days to 11 months for: Rabies, DHLPP, and Kennel Cough. Specifically, the DHLPP vaccines required are: Distemper, Hepatitis, Leptospirosis, Parainfluenza, Parvovirus, and Bordatella. These shots are commonly referred to as DHLPP, 5-in-one, or 6-in-one, and could include the Kennel Cough vaccine as a separate inoculation.

HEALTH: All dogs must be in good health. By placing its dog in our daycare program, the owner certifies to Let's Practice that its dog is in good health, has not been ill with any communicable condition in the last 30 days, and is free of any condition that could potentially jeopardize the health and welfare of the other guests.

BEHAVIOR: All dogs must be non-aggressive and not food or toy protective. By placing its dog in our daycare program, the owner certifies to Let's Practice that its dog has neither harmed nor shown any aggressive or threatening behavior toward any person or other dog.

COST: \$18 per half day (5 hours or less)

\$25 per day

with Discount Card

\$16 per half day in 5-day blocks \$20 per day in 5-day blocks

DAYS & HOURS: Monday – Friday, 7:00 a.m. – 6:30 p.m. Pick-ups after closing time incur late fees as follows: \$5 for the first 5 minutes, \$5 per minute thereafter.

RESERVATIONS: Reservations are required. Preference may be given to pets attending for full days.

THANK YOU FOR YOUR INTEREST IN THE LET'S PRACTICE DOG DAYCARE PROGRAM



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Application

<b>Owner's Information</b>		
Please Print		
Name		
Address		
City	State	Zip Code
Home Phone	Work Phone	
email address		
Employer		
Emergency Contact		
Name		
Phone		
Pet Information		
Name	Breed	Sex
Age	Weight	
<u>Veterinarian</u>		
Name		
Address	City	Zip Code
Phone		

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Pet Profile

General Information			
Dog's Name:			
Dog's Birth Date:			
Dog's Breed and Sex:	Spayed / Neutered:	_Yes _	_No
How long have you owned your dog?			
Where did you get your dog?			
Has your dog ever had any formal obedience training? _	Yes No		
If yes, when and where?			
What commands does your dog know?			
Other comments or information about your dog that you dislikes, health problems, special needs )		-	
What behaviors or problems, etc. would you like for us to	address		
How did you hear about Doggie Day Care?			

## LET'S PRACTICE K-9 OBEDIENCE DOGGIE DAY CARE

## **Health and Temperament Certification**

l,		, he	reby certify th	nat my dog(s)	
are in good healt	h and have not been ill v	with any comr	nunicable dis	ease in the la	ıst 30 days.
•	at my dog(s) have not h son or any other dog.	armed or sho	wn aggressiv	e or threateni	ng behavior
Vaccinations:					
	Rabies expiration:				
	DHLPP expiration:				
	Bordatella expiration:				
Plano, Texas					
Dated:					
			_		
Signature of (	Owner				

## AGREEMENT

- 1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending Let's Practice K-9 Obedience Doggie Day Care ("Center").
- 2. I further understand and agree that in admitting my dog(s) to the Center, Let's Practice K-9 Obedience has relied on my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or any other dog.
- 3. I further understand and agree that Let's Practice K-9 Obedience and their staff, will not be liable for any problems that develop provided reasonable care and precautions are followed, and I hereby release them of any liability of any kind whatsoever arising from my dog(s) attendance and participation at the Center.
- 4. I further understand and agree that any problem that develops with my dog(s) will be treated as deemed best by staff of the Center, in their sole discretion, and that I assume full financial responsibility for any and all expenses involved.

I certify that I have read and understand the rules and regulations set forth on the preseeding page and that I have read and understand this agreement. I agree to abide by the release and regulations and accept all the terms, conditions, and statements of this agreement.

Plano, Texas	
Dated:	 -
Signature of Owner	-
Name(s) of dog(s):	