

### 3 (b) GGS PETCARE Customer Information and Consent Form

**PLEASE FILL IN ALL SECTION  
EXCEPT FAMILIARISATION**

#### Dog Details:

Name of dog (including surname):		Gender:	
DOB:		Breed or description of dog:	
Neuter Status, date of last season or spay/castration:		Microchip No:	
Names of other dogs from the same household:		Colour of dog:	

#### Owner Details:

Name:	
Address:	
Telephone Number:	
Email:	
Emergency Contact Number:	

In case you are unavailable please provide the contact details for a local person that I can speak to in the case of an emergency.

Local Emergency contact name:	
Local Emergency contact address:	
Local Emergency contact telephone number:	
Local Emergency email:	

#### Familiarisation Details (**TO BE COMPLETED BY GGS PETCARE**):

Date of Familiarisation (initial meeting):	
Observations:	
Trial Date:	

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#### Veterinary Details:

Name of Current Veterinary Practice:	
Address of Current Veterinary Practice:	
Telephone Number of Current Veterinary Practice:	
Email Address of Current Veterinary Practice:	
Medical History of Dog:	
Current Medical Treatment and Medications:	
Behavioural History of Dog: (Including likes/dislikes, digs, chews, aggression, etc)	

#### Vaccination Records:

*These treatments are to minimise the risk of parasite/infectious disease spread,*

Vaccination expiry date: (including kennel cough)	
Last flea treatment date: and name of treatment used	
Last worming treatment date and name of treatment used:	

*please let me know when a vaccination /treatment is given+photo of certificate*

#### Insurance Details:

*(Disclaimer: GGS Petcare will only walk/care for insured dogs unless an agreement is made where GGS Petcare will not be held responsible for unforeseen circumstances)*

Insurance Policy Number:	
Insurance Company Name:	

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Insurance Company Telephone  
Number:

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#### Dietary Requirements:

*(Dogs will be fed separately from each other even if they are from the same family)*

Name /Brand of Food:	
Feeding Regime/Frequency Amount:	
Additional Information:	

#### Customer Consent:

	YES	NO
Walking dog on a lead off the premises		
Walking dog off lead off the premises		
Walking dog with other dogs off the premises		
Mixing dogs at premises (inside and outside)		
Feeding dog		
Treating dogs , if there is evidence of parasites , using a treatment which have been authorised by a vet		
Grooming dog		
To administer any required treatments or medications prescribed by a vet		
To be Boarded with dogs from different households		
To keep dogs together in designated room		
To keep dogs from the same household together in same designated room		
Environmental enrichment use of toys or food, some dogs may destroy toys or be food possessive		
Obtaining Veterinary advice or treatment from the Rose Cottage Vet (my registered vet , or dogs own vet <i>(in case of an emergency)</i>		
To use the registered vet to treat or to euthanize if vets advises this due to nature of illness/injury , and as an isolation facility or storage facility in the unfortunate event of death		
Use of crate <i>(if/when required)</i>		

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extra added on inspection use of toys ,  
dogs May destroy toys or be possessive ( I  
only play with toys/ food if dogs on dogs  
own )  
Consent for exercise and enrichment

yes _____	no _____

:

	Yes	No
Your dog will receive at least 2 × 20-minute walks (usually longer) during their day care stay. These will be on and off lead		
Your dog will have frequent opportunities to use the large secure garden area for exercise and toileting if they wish. This will be least four times per day		
Your dog will benefit from interaction with myself and other members of trained staff including cuddles, strokes etc		
Your dog will benefit from socialisation with other socialised dogs		
Your dog will benefit from playing with toys suitable for their size. They will also receive some basic training		
Where exercise is unable to take place due to weather conditions, food/treat enrichment will be used. This will be a food treat stuffed Kong, hide the toy, or mind game puzzle. All food enrichment will be done in their designated room so as not to create competition with other dogs		
If the vet has advised that your dog cannot be exercised for any reason, enrichment set out by the vet will be followed		

#### Owner's Comments:

(Please provide any additional information that you would like GGS Petcare to be aware of)

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#### Agreement:

I consent to GGS Petcare undertaking the actions ticked as YES in the above tables within this document and confirm that all information given is true and accurate.

Customer  
Name:

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Customer  
Signature:

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Date:

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GGG Petcare  
Signature:

Date: