



Dear Dog Owner,

Thank you for your interest in dog daycare. Fido Fitness is committed to providing a safe, fun, and stimulating social environment for your pet during weekday business hours. At dog daycare, your pet will enjoy supervised playtime with other pets and our friendly staff.

Attached you will find the enrollment application to register your dog for our services, a copy of our liability waiver and health certification, and our policies and procedures.

Please complete and return the following documents to Fido Fitness before your first anticipated visit. You can:

- email the completed form back to us at [info@fidofitnessrec.com](mailto:info@fidofitnessrec.com)
- submit it via the contact form on the webpage ([www.fidofitnessrec.com](http://www.fidofitnessrec.com))
- fax it to (206) 350-4096
- mail it to:

Fido Fitness  
2737 Shenandoah Ave NW  
Roanoke, Virginia 24012

You will hear back from us via phone or email within 48 hours after we receive your application. We will contact you with any questions and then schedule your first visit to the daycare at your convenience. Please bring a copy of your vaccination records with you. We **MUST** have a copy of your dog's vaccinations on file before your dog can stay with us.

If you have any questions, please feel free to contact us at (540) 344-2256 or stop by the center to visit our facility. Our office is open Monday through Friday from 7:00am to 6:00pm. We look forward to seeing you and your dog.

Sincerely,

Laura & Eric Berg, Owners  
Fido Fitness

## Fido Fitness Policies and Procedures

**Hours: Drop-off 7am - 9am; Pick-up 4pm - 6pm**

You can schedule a **later drop-off time** and an **earlier pick-up time** by calling us at (540) 344-2256.

### Drop-Off:

- We need an up-to-date copy of your dog's vaccination records on record.
- Potty your dog before entering.
- Bring your dog in on leash. Even the little dogs.
- Keep in mind that some dogs, though fine off-leash, are not friendly on leash.
  - Pay attention to your dog when entering.
  - Hold your dog on a short leash.
- We remove collars before placing your dog in his/her crate.
- If you have noticed anything different or strange about your dog before dropping them off, we'd appreciate it if you could tell us.
- Leave or update any changes in contact information for the day.
- We will take medications, if necessary for mid-day dosing.
  - Leave with your name, dog's name, dosage instructions, and Vet's contact information.
- We gladly accept treats for your dog.
- Patience is appreciated during peak drop-off times.

### Pick-Up:

- Payment is expected before picking up your dog.
- We charge an additional \$1 for each minute after 6pm your dog is picked up.
  - Call ahead if someone other than an owner is picking up.
- We have report cards available, upon request.
- We will hand over your dog on leash.
  - The entrance door is easy for a dog to push open, be careful exiting.
  - Make sure you have a firm grip on the leash.
- We will return any leftover medicine and treats.
- Take a moment to look over and check your dog before heading home immediately and ask us about any concerns you observe.
  - Once you leave our property, we cannot be held responsible for any injuries.

- We use gravel in the play yards. Some dogs may show minimal lameness, an intermittent limp, tender paw pads, or sore feet after the first few times with us. This is common as your dog's paws toughen up. It is perfectly normal.
  - If the lameness or soreness does not fade, please let us know and call your Vet for a check up.
- Patience is appreciated during peak pick-up times.

Miscellaneous:

- We do not accept any dogs with a known history of serious (re: medical attention required following incident) animal or human aggression.
- Intact males and females are welcome to attend daycare at Fido Fitness. It is the owner's responsibility to inform us if an intact female may be coming into season.
  - Intact females **MUST** stay home during their heat cycles.
  - Accidental breedings due to owner negligence are not the liability of Fido Fitness.
- All dogs attending daycare are required to be free of fleas and ticks and be on a monthly flea treatment. If a dog is found to have fleas and/or ticks, we will contact you regarding options.
- Dogs, like children, can get colds, coughs, stomach bugs and other minor contagious diseases. Two of the more common minor contagious diseases are Canine Cough and Puppy Warts. This is an inherent risk whenever dogs are in groups and we will not pay for Vet bills if your dog becomes sick while with us.
  - Dogs that have been ill with a communicable disease in the last 30 days will require a Vet's note before being re-admitted.
  - Dogs sent home with excessive diarrhea will need a Vet's note before being re-admitted.
- **Abandoned Dogs:** We are not a dog rescue group nor do we find homes for homeless dogs. However, we do support and partner with many groups that serve this purpose and can give you their contact information if you need it. No dog may be abandoned at Fido Fitness. Any dog that is left with us after 9pm will be considered abandoned and we will relinquish such cases to the local shelter.
- We are open during all but the most extreme weather conditions: such as wind, rain, snow, or ice causing closures to state or federal offices and/or schools.
- We cannot accept reservations, but please let us know if your dog plans to attend on a regular schedule.
- We have a maximum dog occupancy of 30 dogs a day. First come, first served.

*These policies are subject to change without notice. We reserve the right to refuse service to anyone at our sole discretion.*

# Enrollment Application

Fido Fitness

2737 Shenandoah Avenue NW, Roanoke, VA 24012

## FOR OFFICE USE ONLY

Application	_____	Process Fee	_____	Vaccines	_____
Liability	_____	Policies	_____	Screened	_____
File Card	_____	First Day	_____	Evaluation	_____

## EMERGENCY CONTACT INFORMATION

### Owner Information

Name \_\_\_\_\_

Address \_\_\_\_\_

EMAIL (print clearly) \_\_\_\_\_

Phone #1 \_\_\_\_\_ Phone #2 \_\_\_\_\_

### Emergency Contact

Name \_\_\_\_\_

EMAIL (print clearly) \_\_\_\_\_

Phone #1 \_\_\_\_\_ Phone #2 \_\_\_\_\_

### Pet Information

Name \_\_\_\_\_ Breed \_\_\_\_\_

Sex (circle) Male Female Neutered Spayed Intact

Birthdate \_\_\_\_\_ Weight \_\_\_\_\_

### Veterinarian

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

## PET PERSONALITY PROFILE

Owner's Last Name \_\_\_\_\_

How did you hear about Fido Fitness? \_\_\_\_\_

Dog's Name \_\_\_\_\_ Date when acquired? \_\_\_\_\_

Where did you get your dog? \_\_\_\_\_

If adopted, do you have any knowledge of your dog's past history?

Does your dog like children? \_\_\_\_\_

How does your dog behave around children? \_\_\_\_\_

Are there any other animals in your household? If so, please list type, sex, and age of each:

How does your dog get along with other resident animals?

### Health/Grooming

Does your dog have a problem with fleas? \_\_\_\_\_ Allergies? \_\_\_\_\_

Does your dog have hip dysplasia? \_\_\_\_\_

If yes, what restrictions need to be placed on your dog's activities or movements?

Does your dog like to be brushed? \_\_\_\_\_

How does your dog react to having his/her nails clipped? \_\_\_\_\_

Does your dog have any sensitive areas on his/her body? \_\_\_\_\_

What are your dog's favorite petting spots? \_\_\_\_\_

### Behavior

Does your dog act afraid of any specific items or noises? If so, please explain:

How does your dog react to strangers coming into your home or yard?

Does your dog ever bark or growl at anyone passing outside your home or yard?

Are there kinds of people your dog automatically fears or dislikes?

Are there any kinds of dogs your dog automatically fears or dislikes?

How does your dog react to puppies? \_\_\_\_\_

Has your dog ever: \_\_\_\_\_

Growled at someone? \_\_\_\_\_ What were the circumstances: \_\_\_\_\_

Bitten Someone? \_\_\_\_\_ What were the circumstances: \_\_\_\_\_

Does your dog have any problems in any of the following areas: (if so, please explain below)

Mouthiness/Mouthing: \_\_\_\_\_ Housetraining: \_\_\_\_\_

Barking: \_\_\_\_\_ Jumping: \_\_\_\_\_ Digging: \_\_\_\_\_

Other: \_\_\_\_\_

Explain: \_\_\_\_\_

Has your dog ever growled or snapped at anyone who has taken his/her food or toys away from him/her? \_\_\_\_\_

What were the circumstances: \_\_\_\_\_

Has your dog ever shared his/her food or toys with other animals?

Does your dog play with any toys? \_\_\_\_\_

If yes, what kind of toys does your dog like and what games does he/she play? \_\_\_\_\_

Does your dog play with other dogs? \_\_\_\_\_

Has your dog ever had any formal manners or obedience training? \_\_\_\_\_

If yes, when and where? \_\_\_\_\_

What commands does your dog know? \_\_\_\_\_

Do you have any training issues or concerns you'd like to share: \_\_\_\_\_

Other comments about your dog which you feel might be helpful: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All of the above information is accurate to the best of my knowledge. If any of the above information changes, I will make sure Fido Fitness is informed as soon as possible.

Signature of Owner \_\_\_\_\_

Date \_\_\_\_\_

# New Dog Daycare Evaluation

Dog Owner: Please complete the following brief questionnaire on your dog's interactions with others.  
If there are any additional comments you would like to add, feel free

Employee: Use the questionnaire to temperament test the dog during its first half-day of daycare  
Note your observations in the space provided.

Dog's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

## Questionnaire

How does your dog behave around dogs smaller than him/her?

Playful      Scared      Comfortable      Bossy      Wild      Growly

How does your dog behave around dogs larger than him/her?

Playful      Scared      Comfortable      Bossy      Wild      Growly

Comments: \_\_\_\_\_

Employee Observations: \_\_\_\_\_

How does your dog behave around female dogs?

Playful      Comfortable      Bossy      Growly

How does your dog behave around male dogs?

Playful      Comfortable      Bossy      Growly

Comments: \_\_\_\_\_

Employee Observations: \_\_\_\_\_

Has your dog ever attended another daycare or visited the dog park?    Yes                  No

How was his/her experience?

Employee Observations: \_\_\_\_\_

# Waiver and Assumption of Risk

I, \_\_\_\_\_, voluntarily sign this waiver and assumption of risk in favor of Fido Fitness of 2733 and 2737 Shenandoah Avenue Northwest, City of Roanoke, State of Virginia, in consideration for the opportunity to use the owner 's facilities and/or the opportunity to receive instruction from the owner or the owner 's employees, and/or to engage in the activities sponsored by the owner, as follows:

- Dog daycare, dog play groups, dog socialization/"yappy hours," and/or dog training;
- Canine fitness exercises, use of canine fitness equipment and mental puzzles/games;
- Dog sport training including, but not limited to: Flyball, Barn Hunt, Agility, Nosework, Rally, and Obedience;
- Self-serve dog bathing and grooming services; and/or
- Sport trials and/or competitions.

I understand that there are certain risks and dangers associated with the activity and use of the facilities and that these risks have been fully explained to me. I fully understand the danger involved.

I fully assume the risks involved as acceptable to me and I agree to use my best judgment in undertaking these activities and follow all safety instructions.

I waive and release the owner from any claim for personal injury, property damage, or death that may arise from my use of the facilities or from my participation in the activities or instruction.

I am a competent adult and I assume these risks of my own free will.

Dated \_\_\_\_\_, 20\_\_

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Signature of Customer

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Printed Name of Customer



# Health Certification

Fido Fitness  
2737 Shenandoah Ave NW  
Roanoke, VA 24017

Owner's Name: \_\_\_\_\_

Dog's Name: \_\_\_\_\_

I, \_\_\_\_\_, owner of \_\_\_\_\_,

hereby warrant that my dog is on \_\_\_\_\_ (flea  
treatment), and I will provide my receipt or box upon request if asked.

The dog's last fecal exam was \_\_\_\_\_ and the result was **POSITIVE**  
**NEGATIVE**

At the following clinic: \_\_\_\_\_

With (your Veterinarian): \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_