



1046 Massachusetts Ave, Arlington, MA 02476. (781) 325-6088 - www.go-play.biz

2016 DAYCARE EVALUATION FORM

Client's (Human) Name: _____ Phone: _____ Email: _____

Dog's Name: _____ Breed: _____ Age: _____ Sex: _____ Spayed / Neutered: _____

Is your dog friendly with other dogs? (Please circle one) **Yes** **No**

Has your dog ever met another dog he's disliked? If so, please explain: _____

Is your dog friendly with people? (Please circle one) **Yes** **No**

Has your dog ever met a person he's disliked? If so, please explain: _____

Has your dog ever participated in daycare? (Please circle one) **Yes** **No** If so, where? _____

Are you leaving that daycare? _____ If so, why? _____

Please list your dog's social experiences: (Please circle all that apply)

Dog Park: Daily Weekly Monthly Never

Plays with Dogs: Daily Weekly Monthly Never

Please describe your dog's behavior toward other dogs: (Please circle all that apply)

Playful Shy Aggressive Dominant / Pushy Unpredictable Plays Rough Prefers to Chase

Submissive Nervous Prefers to Hide Tries to Avoid Guards Food Guards Toys Guards Water

What does your dog do when you: (Please circle all that apply)

Approach him when he's eating? Leaves the bowl Continues to eat Gulps the food

Growls Bears his teeth Snaps / Bites

Take toys away? Tugs on toy Backs away Initiates Play

Growls Bears his teeth Snaps / Bites

Touch his neck or collar? Nothing Tries to get away Seems Nervous

Growls Bears his teeth Snaps / Bites

Touch him while he's sleeping? Nothing Tries to get away Enjoys the pats

Growls Bears his teeth Snaps / Bites

Please select any problems or concerns that pertain to your dog: (Please circle all that apply)

Soils indoors Jumps on people / surfaces Aggressive with other animals (explain): _____

Shy Runs away when called Growls at people (explain): _____

Barks Excessively Play bites / mouthy Bites (explain): _____

Escape Artist Doesn't like being handled Aggressive with food (explain): _____

Has your dog ever growled at, snapped at, or bitten a person? If so, explain: _____

Has your dog ever growled at, snapped at, or bitten another dog? If so, explain: _____

Does your dog crate well - No barking, digging, crying, etc. in crate? (Please circle one) **Yes No**

I verify the information stated about my dog above is accurate and that I have disclosed everything necessary about my dog. I understand that an evaluation and trial day is not a guarantee my dog will be accepted into daycare. I understand Go Play! has the right to refuse service to my dog. I understand that Go Play! is not responsible for any liability associated with my dog. I am responsible if my dog injures any persons, animals, or property while cared for by the staff at Go Play! I understand if my dog passes this evaluation I will be responsible to pay for one full or half day of daycare that will serve as my dog's trial day. I understand I must book the trial day for a time when I am available to pick up my dog immediately. I authorize Go Play! to make necessary medical decisions for my dog and understand that I am responsible for those costs while my dog is in the care of Go Play! By signing below I am in agreement with Go Play's policies for 2016.

Owner's Printed Name: _____ Owner's Signature: _____ Date: _____