



## Client Questionnaire

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Owner/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Dog's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  Male  Female

Weight \_\_\_\_\_ Breed \_\_\_\_\_ Spayed/Neutered?  YES  NO

Do you regularly vaccinate your dog?  YES  NO

Primary Vet \_\_\_\_\_ Clinic Name \_\_\_\_\_

Clinic Phone \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Has your dog suffered any injury? If so, what and when? \_\_\_\_\_

\_\_\_\_\_

Has the injury been evaluated by a veterinarian? \_\_\_\_\_

\_\_\_\_\_

Has your dog undergone surgery? If yes, type of surgery, by whom and when? \_\_\_\_\_

\_\_\_\_\_

Is your dog on any medications? If so, what and why? \_\_\_\_\_

\_\_\_\_\_

Does your dog suffer from any medical conditions? i.e. Epilepsy, incontinence, skin disorders, etc. \_\_\_\_\_

\_\_\_\_\_

Has your dog ever been swimming?  YES  NO

What are your goals for swimming your dog? \_\_\_\_\_

\_\_\_\_\_

How does your dog react to being held or touched? \_\_\_\_\_

Are there any behavioral issues we need to be aware of in order to ensure proper handling, and allow your dog more comfort & confidence in this environment? \_\_\_\_\_

Please describe your dog's daily exercise routine. i.e. walk length/duration, crated, play time \_\_\_\_\_

What do you feed your dog? i.e. brand / daily amounts / treats \_\_\_\_\_

Do you give your dog supplements? If so, what kind \_\_\_\_\_

Do you have any other pets? \_\_\_\_\_

Will you need assistance with getting your dog from the parking lot into our facility?  YES  NO

We may ask you to assist us by holding your dog's collar as we guide them in/out of the pool. Do you have any physical restrictions that would prevent you from climbing a small set of deck stairs and assisting us?  YES  NO

**LIABILITY AGREEMENT:**

I warrant that I am the owner or person responsible for the canine(s) brought to The Puddle, LLC for services, and therefore accept full liability and responsibility for damages to property, injury or death to myself, people, other animals or my own canine arising out of use of the facility and my actions, along with the actions of my canine(s), and accordingly agree to indemnify and hold harmless, The Puddle, LLC, its owners and employees for money damages and attorney fees.

I understand that The Puddle, LLC is not a licensed veterinary facility and does not provide medical procedures. I agree that I am ultimately responsible for determining whether the swim services provided by The Puddle, LLC are appropriate for my dog(s).

**I understand that if my dog defecates in the pool, the pool may have to be shut down to contain any damage. Depending on the severity of the damage, the pool may be closed for a minimum of 24 hours. For this reason, the swim session is cancelled, and payment is non-refundable. I, the owner, may be assessed a fee of \$150 to partially cover the cost of cleanup.**

I understand and agree that payment is due at the time of services. I understand and agree that a 12-hour prior notice of cancellation is requested in order that my time slot can be utilized by another customer.

I certify that I have read and understand this Agreement, and that the information set forth is true and correct. I agree to accept all the terms, conditions, and statements of this agreement, and any rules, regulations, policies and procedures of The Puddle, LLC.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Completed forms may be faxed (630) 206-1092 or emailed to: [cm@thepuddleaquafitness.com](mailto:cm@thepuddleaquafitness.com)*

*The Puddle • 1948 Gyorr Ave. South Elgin, IL 60177 • 630-883-0700*