

Daycare Enrollment 2020 Daycare Hours Monday-Friday 6:30am-6:30pm

Thank you for considering BMKAM, LLC (DBA Ruuff Luv Doggie Daycare). We are committed to providing a safe, fun, and stimulating social environment for your dog. At doggie daycare, your dog will not be placed in a crate for long hours, but will enjoy supervised playtime with other dogs and our staff.

To enroll, simply fill out the forms below and return them to Ruuff Luv Doggie Daycare, along with proof of vaccinations. You may enroll by:

Owner's Name:	 In person at 10913 Elm Street Omaha, I 					
Owner's Name:			\$30 Evaluation	\$30 Evaluation Date		
Address:	Owner's Name:					
City:State:Zip: Email:Please, check if you DO NOT wish to receive updates, newsletter and special ofters via email. (We NEVER sell information to third parties.) Owner 1:Phone(s): © home © cell Owner 2:Phone(s): © home © cell Place of employmentPhone(s): © home © cell Place of employmentPhone(s): © home Phone: Place of employmentPhone(s): © home Place of employmentPhone: Place of employmentPhone: Others allowed to pick-up dog(s): Others allowed to pick-up dog(s): Pter Information Dog's Name: Breed/Description: Birthday:/ Weight: Color: Microchip # ID Tag Vaccination due dates & prevention: Rabies:// Bordetella/kennel cough://	Addroop		Collar Size			
Email:	City: State:	 Zin:	Color	Thread		
Please, check if you DO NOT wish to receive updates, newsletter and special offers via email. (We NEVER sell information to third parties.) Phone #	Email:	 ip:				
offers via email. (We NEVER sell information to third parties.) Owner 1:Phone(s): © home © cell Owner 2:Phone(s): © home © cell Place of employmentPhone(s): © home Phone: Emergency Contact Name: Phone: Others allowed to pick-up dog(s): Others allowed to pick-up dog(s): Veterinarian Information Clinic: Phone: Pet Information Dog's Name: Breed/Description: Birthday:/ Weight: Color: Microchip # ID Tag Vaccination due dates & prevention: Rabies:// Bordetella/kennel cough:/_/			Phone #			
Owner 2:Phone(s): © home @ cell Place of employment Phone: Emergency Contact Name: Phone: Others allowed to pick-up dog(s): Others allowed to pick-up dog(s): Veterinarian Information Clinic: Phone: Address: Pet Information Dog's Name: Breed/Description: Birthday: Weight: Color:	/ /					
Place of employment Phone: Emergency Contact Name: Phone: Others allowed to pick-up dog(s): Others allowed to pick-up dog(s): Veterinarian Information Clinic: Phone: Address: Phone: Pet Information	Owner 1:Phone(s):	1:Phone(s): 😳 home				
Emergency Contact Name:	Owner 2:Phone(s):	Phone(s): 🕲 home		© cell		
Emergency Contact Name:	Place of employment		Phone:			
Others allowed to pick-up dog(s):	Emergency Contact					
Others allowed to pick-up dog(s):	Name:	Phone:				
Address: Pet Information Dog's Name: Birthday: / Weight: Color: Birthday: Birthday: Birthday: Birthday: Difference Dif	Others allowed to pick-up dog(s):					
Address: Pet Information Dog's Name: Birthday: / Weight: Color: Birthday: Birthday: Birthday: Birthday: Difference Dif	Clinic:	Phone:				
Dog's Name: Breed/Description: Birthday:// Weight: Color: Birthday:/ Date: (Spay/Neuter) Color: Male Female Date: (Spay/Neuter) Microchip # ID Tag Vaccination due dates & prevention: Rabies:// Bordetella/kennel cough://						
Birthday:// Weight: Color: Male Female Date: (Spay/Neuter) Microchip # ID Tag Vaccination due dates & prevention: Rabies:// Bordetella/kennel cough://	Pet Information					
 Male Female Date: (Spay/Neuter) Microchip # ID Tag Vaccination due dates & prevention: Rabies:// Bordetella/kennel cough:// 	Dog's Name:	Breed/Description:				
Vaccination due dates & prevention: Rabies: / / Bordetella/kennel cough: / / /						
	Microchip #	ID Tag				
DA2PPV or DHPCPV// Lepto:// Canine Flu://	Vaccination due dates & prevention: Rab	es:// Bor	detella/kennel cough:	//		
	DA2PPV or DHPCPV// Lepto:	// Car	nine Flu:///	_		



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Flea/ Tick Treatment Needed April thru October Recommend Seresto collar

I understand that it is my responsibility to ensure my dog has up to date vaccinations/treatments and if my dog has not had **one or the series of** the above listed vaccinations/treatments I will not hold Ruuff Luv Omaha Doggie Daycare, and its affiliates responsible, if my dog becomes ill and/or contracts any of the illnesses/issues, that are normally prevented by administering these vaccinations/treatments, while under their care. **INITIAL**

Health History:

My dog is in good health and has not had any contagious diseases in the last 14 days **INITIAL** ______ Health issues the doggie daycare should be aware of: (such as seizure's, hip dysplasia, patella knees etc.)

Behavior:

My dog has issues with –
[] Anxious/Nervous [] Kennels [] Being on a leash [] Aggression [] Other: ______
Explain: ______

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

Where does your dog usual	y sleep? 🗆 Wire Kennel	Plastic Kennel	Floor	□Your Bed	
Feeding Info - Food Brand:	Am	Amount:		How many times per day:	

Other Information that may help ease your dog during Daycare or Boarding:

IMPORTANT INFORMATION

All dogs must come in prior to boarding/daycare for a temperament evaluation. Evaluations are \$30 and we ask that your dog(s) come for 5 hours for us to be able to fully evaluate them.

Daycare

Single Day, 5, 10, and 20 day passes available Ask for details Check-In: After 6:30am Check-Out: Before 6:30pm Late Fee: \$15 after 6:30pm

Boarding Must be coming regular (includes Daycare) Check-In: After 1pm Check-Out: Before 1pm Early/Late Fee: \$15 per family Holiday fee \$25 per family for Thanksgiving, Christmas & Easter By Appointment Only

20% discount for each additional





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