

Furry Tales Doggy Daycare Client Form

Client Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____

Cell: _____

Valid E-mail address: _____

We do send dog updates, picture(s) and video(s).

Vet Information: (please list all vets)

Emergency Contacts (other than vet):

Name: _____

Name: _____

Address: _____

Phone: (H) _____ (C) _____

City: _____ State: _____ Zip: _____

Name: _____

Phone: _____

Phone: (H) _____ (C) _____

_____	_____	_____	_____
Dog's Name	Breed	Spayed/Neutered?	Age (birthday)
_____	_____	_____	_____
Dog's Name	Breed	Spayed/Neutered?	Age (birthday)
_____	_____	_____	_____
Dog's Name	Breed	Spayed/Neutered?	Age (birthday)

Medical History:

Medication(s):

Feeding/Special Instructions: Food Aggression?

Are you interested in our training program? _____

As owner of the above said pet(s), I hereby give consent to Furry Tales Doggie Daycare, Inc. for emergency medical care as prescribed by a duly licensed veterinarian. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my pet.

Signature: _____ Date: _____

Additional Information on Your Pet

Dog's Name: _____ Owner's Name: _____

Has your dog been in day care before? Yes___ No___

If yes when, for how long and reason for leaving? _____

Has your dog been socialized with other dogs? Yes___ No___

Has your dog been socialized with men and women? Yes___ No___

Is your dog aggressive with strangers? Yes___ No___

Is your dog aggressive on walks towards people? Yes___ No___

Is your dog aggressive on walks towards other animals? Yes___ No___

Is your dog allowed to have biscuits? Yes: _____ No: _____

Does your dog have any allergies? Yes___ No___

If yes please list them. _____

Is your dog on a flea treatment? Yes___ No___

If yes what kind. _____

Has your dog been in training classes and /or private? Yes___ No___

If yes by who, when and for how long. _____

Please check what applies to your pet.

Problems

Dog aggressive___

People aggressive___

Jumps up___

Chews___

Food aggressive___

Barks___

Runs away___

Unruly___

Escapes___

High jumper___

Shy___

No obey___

Toy possessive___

People possessive___

Separation anxiety___

Stool eater___

Picky eater___

House soils___

Other___

Is there anything else we need to know about your dog? _____

How did you hear about us? _____

Furry Tales Doggy Daycare

Requirements and Hold Harmless Agreement

Behavior: I understand that my dog(s) must be friendly towards other dogs and people. They must not be food or toy protective. Owners certify that their dog(s) have not harmed, caused death or shown aggression towards any person or dogs.

I understand that if my dog has a history of aggression or biting, Furry Tales Doggy Daycare, Inc. reserves the right to refuse service, and that all bites will be reported to the local authorities as required by law. I understand that if my dog is food aggressive, it will be crated or separated during all feeding times for the safety of the other dogs. We have the right to refuse service to any dog that we believe is no longer suitable for daycare at anytime.

I understand that I am responsible for any medical care expenses and damages that result from injuries caused by my dog while attending Furry Tales Doggy Daycare, Inc.

I have disclosed to Furry Tales Doggy Daycare, Inc. all known dangers associated with my dog.

Vaccinations: I understand that my dogs(s) must be current on their vaccinations. Owners must submit written proof of current DHLPP, Rabies, and Bordetella vaccinations from a licensed veterinarian. Dogs will be required to have their Bordetella every 6 months. Dogs must also be on a flea and tick program. If, at any time during care, a dog is noticed to have fleas or ticks, treatment will be applied and charged to the parent (depending on size of dog) at a starting rate of \$30.00.

Health: I understand that my dog(s) must be in general good health and free of any contagious diseases which could potentially jeopardize other guests. Dogs that have been ill with a communicable condition in the last 30 days will require veterinarian certification of health to be admitted or readmitted. My dog has not been exposed to Distemper, Rabies, Giardia, Bordetella, Parvo or any type of intestinal parasite within the last thirty days. If my dog is boarding for longer than one week he/she must have a fecal report from their vet that has been recorded negative at least two weeks prior to boarding. If my dog is boarding for longer than five days, it must be given a bath to maintain cleanliness and to protect from matting, and skin irritations.

I understand that my dog's nails must be at a reasonable length so as not to harm itself, the staff or other dogs. If my dog's nails are long, sharp, or hanging, Furry Tales Doggy Daycare must clip or grind them as needed at a charge of \$10; this fee may increase if the dog is unruly for a nail trim.

If any medical problems develop while my dog is in the care of Furry Tales Doggy Daycare, Inc., I authorize Furry Tales Doggy Daycare, Inc. to do whatever they deem necessary for the safety, health, and well being of my dog. Further, I agree to assume full financial responsibility for any and all expenses incurred.

I agree to notify Furry Tales Doggy Daycare, Inc. as soon as I know of any illnesses/conditions that my dog develops that may put other members at risk.

Age: Puppies are invited to participate if all shots are up to date. Exceptions and additional fees may apply, please inquire. Must be 4 months or older. Older dogs requiring extreme medicinal schedules may be subject to an additional fee.

Spay/Neuter: All dogs must be spayed or neutered unless under 7 months of age.

Reservations/ appointments: Reservations are required for boarding along with a credit card number. A \$25 deposit is required upon booking for stays less than four nights; a 50% deposit is required upon booking for stays over four nights. Cancellations with less than 48 hour notice will result in owners being denied their initial deposit fee. Grooming appointments cancelled with less than a 24 hour notice will result in a \$25 fee.

Application: Clients must notify Furry Tales of any changes to their personal or pet information sheet.

Dog Interview: To be accepted, all dogs must go through an interview. Interviews allow us to meet you and your dog and to find out how they will interact with other dogs in our daycare. Interviews are by appointment only. Please bring written proof of vaccinations with you. Dogs may be refused daycare services if found by the staff, to be no longer suitable.

Daycare: Although we screen for temperament, watch the dogs carefully, and **do not** take aggressive dogs, day care can be hazardous due to dogs playing together. They can get rambunctious at times and we cannot be held responsible for injuries and/or death that may occur in and out of the day care including the transporting of animals.

I understand that Furry Tales Doggy Daycare, Inc. is a cage-free facility. I accept the risks involved and agree that Furry Tales Doggy Daycare, Inc. is not liable for any injuries or illnesses resulting during my dog's visit.

I understand that Furry Tales Doggy Daycare, Inc. walks all dogs on a choke chain unless otherwise requested in writing. One walk is included with day care, additional walks can be purchased.

Fees: I understand that the hours of operation are Monday-Friday 7:00am-8:00pm, and Saturday - Sunday 9:00am-8:00pm. Payment is due in advance for prepaid daycare packages. Prices are subject to change at any time. Cash, check or MasterCard/Visa is accepted. Pre-paid packages are non-refundable. Dogs not picked up by 10:00 pm will be kept overnight at your expense of \$55. I understand that I will be charged a \$25 fee for returned checks. Drop offs before 7am and pick-ups after 8pm are subject to a \$10 additional fee.

I understand that if a balance goes unpaid after a period of 30 days, a 5% late fee will be added each day to the invoice until it is paid in full. I understand that if an unpaid balance remains unpaid for 60 days or more, unless another arrangement is made, my account will be turned over to a collection agency. If Furry Tales Doggy Daycare, Inc. or its assign hires an attorney to collect any money owed under this Agreement I will be liable for collection costs and all reasonable attorneys' fees and court costs (including, without limitation, reasonable expert witness fees) in addition to the unpaid balance. Prices are subject to change at anytime.

Legal: I waive and relinquish any and all claims against Furry Tales Doggy Daycare, Inc., its employees and representatives. I understand that under no circumstances will Furry Tales Doggy Daycare, Inc. be liable for consequential damages or damages beyond the replacement value of my dog.

It is the policy of Furry Tales that you do not visit your dog while in our care; however I understand that if I do choose to visit my dog(s) on the premises that Furry Tales Doggy Daycare, Inc. is not liable for any injuries/damages I may suffer from my dog or any other dog.

I understand that photographs or other graphic, sound, or other image, likeness, recording, etc., may be made of my dog(s) at Furry Tales Doggy Daycare, Inc. and that such may be used for any purpose without compensation, and I release to Furry Tales Doggy Daycare, Inc. all rights that I may possess or claim to such image, likeness, recording, etc.

Abandonment: I agree to that if my dog(s) is left at Furry Tales Doggy Daycare later than the time agreed upon, I will be subject to the standard fees. If I leave my dog(s) longer than 3 days at Furry Tales Doggy Daycare without contact regarding the dog(s), I forfeit all rights of ownership of that dog(s) and Furry Tales Doggy Daycare may assume that the dog has been abandoned. Furry Tales Doggy Daycare will proceed with whatever actions are deemed most beneficial for the dog.

Personal Property: I understand and agree Furry Tales Doggy Daycare, Inc. shall not be held responsible for any damage to my property, or that of others, caused by my dog during the period in which they are in its care.

Owner: I hereby declare Furry Tales Doggy Daycare, Inc. that I am the legal owner of my dog; that my dog has been vaccinated as indicated by records present; that my dog is currently and properly licensed; that my dog is not aggressive.

We reserve the right to refuse a visit if your dog arrives without the previous conditions met. This type of environment may not be suitable for all dogs and we reserve the right not to admit dogs based on temperament and level of sociability at anytime. Dogs must enter and exit the building on a leash.

By signing this form, you or your representative(s) hold Furry Tales Doggy Daycare, Inc. free and harmless from and against any and all claims, costs, expenses, lawsuits, liabilities, penalties, forfeitures, losses and expenses, reasonable attorneys' fees, court costs (including, without limitation, reasonable expert witnesses' fees), judgments, administrative rulings or orders, fines, and/or costs, in law or equity, and of every kind and nature whatsoever, actually or reasonably incurred, which

arises from, or caused or resulting, in whole or in part, directly or indirectly, arising out of or relating to liable for any injuries to your dog.

By signing this form, you acknowledge that you understand and accept the terms and conditions set forth by this agreement. I have read the above requirements and hold harmless documents in its entirety and agree to comply.

CLIENT (Print Name) _____ **DATE:** _____

Signature: _____

Please Note: We are not affiliated with Market Street Veterinary Clinic; however, we work very closely with them so we suggest that you do make an appointment for an examination so that they are familiar with your dog. If an emergency were to happen, they will be able to see your dog immediately during their operation hours. This would also be helpful if your dog is in need of updated vaccinations. For their regular clients, we do drop off and pick-up service for vet appointments if the dog is in daycare. It is the owner's responsibility to schedule vet appointments and settle payment with Market Street Veterinary Clinic.

Emergency/Extreme Circumstances Waiver (Part One)

Who is responsible for your pet upon your illness or death? How do we contact them?

Name _____ Phone/email _____

Name _____ Phone/email _____

Client
Signature _____ Date _____

Emergency/Extreme Circumstance Waiver (Part Two)

We at Furry Tales Doggy Daycare want to assure our dog owners that our staff did all that was possible.

During my absence, Furry Tales Doggy Daycare will be caring for my pet(s). If Furry Tales Doggy Daycare is unable to reach me in the event of an emergency, I authorize Market Street Veterinary Clinic to administer medical treatment and will be responsible for payment to Market Street Veterinary Clinic upon my return.

I, _____, give Furry Tales Doggy Daycare permission to transport my pet(s) to the above veterinarian in the event of an emergency.

If this veterinarian is not available, I authorize Furry Tales Doggy Daycare to transport my pet(s) to the next closest veterinary facility and authorize treatment. If emergency care is needed after regular office hours, my pet(s) may be taken to the nearest Veterinarian Emergency Clinic/Hospital.

I give permission to provide treatment up to \$_____.

I agree that Furry Tales Doggy Daycare is released from all liability related to transportation to and from the veterinarian and treatment for sickness or emergency. *Furry Tales Doggy Daycare will not pay any portion of veterinary expenses associated with seeking medical care for my dog if so necessary.*

I agree to authorize Market Street Veterinary Clinic to euthanize my pet in extreme circumstances after all reasonable attempts have been made to reach my emergency contact or myself. In the unfortunate event of my dog's death, I authorize Furry Tales Doggy Daycare to release my dog to Market Street Veterinary clinic to be held until my return.

This agreement will remain valid for all visits unless a new one is signed. A copy is permitted to be faxed/released to the above veterinarians.

Client Signature _____ Date _____

Decline Market Street Veterinary Clinic Services Waiver

During my absence, Furry Tales Doggy Daycare will be caring for my pet(s). Upon a non-emergency, I decline any and all services by Market Street Veterinary Clinic and plan to pick up my pet(s) and take the pet(s) elsewhere. I understand Furry Tales Doggy Daycare will contact me first, then my emergency contact if a situation arises where the circumstances are necessary. Furry Tales Doggy Daycare will not be responsible for treatment (other than first-aid), injury, death or any transportation because of my choice to decline services by Market Street Veterinary Clinic.

This agreement will remain valid for all visits unless a new one is signed. A copy is permitted to be faxed/released to the above veterinarians.

Client

Signature _____ Date _____

Credit Card Authorization Information
This information is kept confidential at all times.
"We Do Not Accept American Express"

Credit card number: _____

Expiration date: _____

Security code: _____

Zip code: _____

Signature: _____

Date: _____

FURRY TALES GROOMING WAIVER 2010

EMERGENCY TREATMENT

While my pet(s) are in the care and custody of Furry Tales Doggy Daycare, Inc. (hereafter referred to as FTDD), in the event of an emergency, I hereby authorize FTDD to seek immediate veterinary care for my pet. I understand that all costs in connection with veterinary, medical, and other treatment shall be my responsibility.

HEALTH

My dog(s) is(are) in good health, able to withstand the rigors of bathing and styling, and free of any contagious diseases which could potentially jeopardize other animals or people, nor is(are) it(they) at high risk for seizure, suffocation, or heart attack while standing up to be bathed, blow dried and styled.

I agree to remain in compliance with all FTDD health and safety requirements, including vaccination schedules, flea and tick prevention, and illness, disease or aggression notification.

WALKS

I agree to allow FTDD and its groomers to walk my dogs outside for bathroom breaks.

ABANDONMENT

I agree to that if my pet(s) is left in the FTDD grooming salon later than the time agreed upon, I may be subject to Daycare (and/or other) fees.

I agree that if I leave my pet(s) longer than 3 days at FTDD grooming salon without contact regarding the pet, I forfeit all rights of ownership of that pet and FTDD may proceed with whatever actions are deemed most beneficial for the pet.

LIABILITY RELEASE

I hereby release and agree to save and hold harmless Furry Tales Doggy Daycare (FTDD), it's employees, and independent contractors working at FTDD from all liability, claims, suits, actions, loss, injury, or damage which my pet may sustain.

I specifically, without limitation, agree to fully identify FTDD for any and all such claims, suits, action, losses, injury or damage.

I waive and relinquish any and all claims against FTDD, its employees, representatives and independent contractors working at FTDD. I understand that under no circumstances will FTDD be liable for consequential damages or damages beyond the replacement value of my dog.

WAIVER OF RIGHTS

By signing this form, you or your representative(s) hold Furry Tales Doggy Daycare Inc. (FTDD) and any of its employees or independent contractors working at FTDD free and harmless from and against any and all claims, costs, expenses, lawsuits, liabilities, penalties, forfeitures, losses and expenses, reasonable attorneys' fees, court costs (including, without limitation, reasonable expert witnesses' fees) judgments, administrative rulings or orders, fines and/or costs, in law or equity, and of every kind and nature whatsoever, actually or reasonably incurred, which arises from, or caused or resulting, in whole or in part, directly or indirectly, arising out of or relations to liable for any injuries to your dog. By signing this form, you acknowledge that you understand and accept the terms and conditions set forth by this agreement.

This waiver will remain on file and is valid for any services to any of the pets owned by you for the lifetime of the pets.

PRINT NAME _____

SIGNATURE _____ Date _____