



PET BOARDING / DAYCARE FORM



/ /
Date

Client Details

Full Name _____ Phone _____
Email _____ City _____ State _____
Address _____
Emergency Contact/Second Owner _____ Phone _____
Are any other people allowed to pick up your pets? ☐ Yes ☐ No If Yes, Name _____

Pet Details

Name _____ Breed _____ Sex _____ Neutered? ☐ Yes ☐ No
Current Veterinary Doctor _____ Phone _____
Weight _____ Color _____ DOB (If known, else approx.) _____
Number of meals in a day _____ Feeding Instructions _____
Aggression issue with other animals? If yes, please detail _____
Behavior or temperament issues? If yes, please detail _____
Does your pet escape from enclosed area? If yes, please detail _____

Pet Medical Details

Any allergies? If yes, please detail _____
When was the last deworming done? _____
Any current medical issue or illness in past 30 days? _____
Is your dog vaccinated and are his vaccinations up to date (including booster doses)? ☐ Yes ☐ No
Have you shared your dog's vaccination card with us? ☐ Yes
Anything else you would like us to know? (Any minor or other health details) _____

Boarding Details

Boarding Start Date _____ Boarding End Date _____ Boarding Charges _____

Terms & Consent

1. I confirm that I own the pet or I am given authority by the owner for taking ownership of the pet.
2. In the event of minor health concerns such as allergies associated with bee stings or ticks that your pet can get from the park, the associated costs and treatment will be encompassed within the boarding fees itself from our in-house veterinary doctors and team. And should a significant health issue arise, we will seek your consent prior to initiating any procedures by our veterinary team. Please note that additional charges may apply for such services.
3. I understand that the dog park cannot be held liable for events beyond human control, including but not limited to acts of God or natural disasters.
4. I acknowledge that as a dog owner, I can be held liable for any damages caused by my dog, including property damage or injuries, such as biting or harming others
5. I confirm that I have shared my dog's vaccination card and information I entered in this form is true and accurate

☐ I hereby declare that I agree to the above terms.

Signature