

Pet(s) name: \_\_\_\_\_ M/F

Age(s): \_\_\_\_\_ Breed(s) \_\_\_\_\_

Owner name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Post. Code \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Drop off date: \_\_\_\_\_

Pick up date: \_\_\_\_\_

Early Pickup without 24hr notice: you will be charged for the additional day. \_\_\_\_\_(initial)

Feeding information: \_\_\_\_\_

Snacks: YES/NO \_\_\_\_\_

Allergies: YES/ NO \_\_\_\_\_

Medication being given: \_\_\_\_\_

Pets' personal belongings: \_\_\_\_\_

Playtime with other dogs, owners' risk. YES/NO \*we use caution, but superficial skin injuries can happen\*

How often does your dog play with other dogs?

What gender and size would your dog prefer?

Sign: \_\_\_\_\_

Is your dog(s) very scared of thunderstorms? YES/NO

Is your dog(s) spayed/neutered? YES/NO

Pictures on our Facebook Boarding page: YES/NO

Please take the time to read this 😊

\*Owners agrees to pay all fees for boarding, day boarding, veterinary care or other services owed on the day of pick up

\*Owner specifically represents that they are the sole or joint owner of the above-named pet, free and clear of all liens and encumbrances

\*Owners acknowledges that dogs that are kenneled together are from the same household. Owners assumes all responsibility for any aggressive behavior, fighting or injury that one dog may inflict upon another while they are together.

Old MacDonald kennels reserves the right to separate any dogs who are boarding together at our discretion for the dogs' own safety. If your dogs are not compatible boarding in the same kennel unit, you will be billed and responsible for the cost of more than one kennel.

\*Owners agrees that Old MacDonald Kennels and our representatives and employees will not be liable or responsible for any lost, stolen or damaged personal property belonging either to the Owner or the pet. Owners also understands and agrees that the pet's collar will be removed in the kennel and play areas to prevent injury to the pet.

### **Abandonment**

Owners understands and agrees that if his or her pet is not picked up within fifteen (15) calendar days after the scheduled pick up date, or Owners refuses to pay agreed upon charges, the pet shall be deemed to be abandoned.

### **Health and Vaccinations**

Owners represents to Old MacDonald Kennels that, to Owners knowledge, your pet has not been exposed to any contagious diseases within a thirty-day period prior to check-in.

Owners understands that all pets at Old MacDonald kennels are fully vaccinated.

However, it is still possible for your dog to become ill.

Owners understands that this is not due to any circumstance or condition at Old MacDonald Kennels and agrees to not hold Old MacDonald kennels liable in the event your dog becomes ill during or after his/her stay.

**\*Please let us know if your dog is coughing \***

The Kennel will exercise reasonable care in boarding your animal. You agree to hold the Kennel free of all responsibility and/or liability for illness, injury, or death of your animal in the absence of gross negligence. You agree that the kennel's liability shall in no event exceed the current market value of a pet of similar breed or pedigree.

Please sign after reading \_\_\_\_\_

## Emergency Medical Treatment

Owners acknowledges that, in the unlikely event your pet becomes ill or injured, or if your dog has a pre-existing condition which is aggravated by its stay, and requires professional attention, we will attempt to notify you or your Emergency Contact at the phone numbers you provided.

**\*PLEASE PICK ONE and INITIAL\***

**A.** Authorize us to transport your animal to the veterinarian of your choice and authorize the veterinarian to perform any treatment/procedure/service the veterinarian deems medically necessary for the health and well being of your pet. You understand that you will be responsible for these treatment costs.

\_\_\_\_\_

**B.** You do NOT authorize any veterinary treatment till you are contacted. You specifically understand that this may delay treatment to the detriment of your pet's health and you agree to hold the kennel harmless. You understand that you will be responsible for these treatment costs.

\_\_\_\_\_

**C.** Authorize us to transport your animal to the veterinarian of our choice and authorize the veterinarian to perform any treatment/procedure/service the veterinarian deems medically necessary for the health and well being of your pet.

Do not exceed the cost of \$\_\_\_\_\_ without consulting you.

You understand that you will be responsible for these treatment costs.

\_\_\_\_\_

Pet owners agrees that you have read this entire Agreement. You have had the opportunity to discuss it with us to your satisfaction, and you agree to its terms.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_