



ADVANCED PET

S E R V I C E S

Owner's Name: _____ Email: _____

Address: _____ City / State / Zip: _____

Home Phone: _____ Cell Phone #1: _____ Cell Phone #2: _____

Pet Type: _____ Spayed Neutered

Pet's Name: _____ Breed(s): _____

Sex: _____ Weight: _____ Color: _____ Birth-date: _____

Referred By: _____

Medications: Name of Medication:

How Much: _____ How Often: _____

Feeding Instructions

Type of Food: _____ How Much: _____ How Often: _____

(Brand)

Medical Information – Veterinarian's Name / Clinic : _____

Phone: _____ City / State / Zip : _____

No Shots, No Docs, No Service! Advanced Pet Services will not board, train, provide daycare, or groom your pet without updated vaccination documentation. So, please provide vaccination documentation and medical records.

In addition, please list the current expiration dates for the following vaccinations:

Rabies _____ DHLPP _____ Bordetella _____

Please describe any medical or physical conditions, including any medications or allergies.

Emergency Contact (other than owner) Name : _____

Phone : _____ Email : _____ Relationship : _____

Other Information.

Has your dog been ill in the last 30 days? Yes No

Is your dog displaying any unusual symptoms such as coughing, sneezing, or upset stomach? Yes No.

Has your dog ever bitten, attacked or shown aggressive behavior towards people or dogs? Yes No. If yes, explain:

Has your dog ever been bitten or attacked by another dog, or been abused? Yes No. If yes, explain:

Please describe any behavioral problems, identify any dietary conditions, or other important information we should know:

Pet Pickup – Advanced Pet Services will release your pet to the following person(s) :

Advanced Pet Services Policies & Legal Stuff * Please Read and Initial Each Section *****

1. ___ Advanced Pet Services reserves the right to immediately change your pet's type of boarding or daycare if we believe it is necessary to protect the health and well-being of your pet, other pets, or our staff, and Owner agrees to pay any additional costs associated with the change.
2. ___ Owner agrees to pay all costs and charges for special services requested, and provide updated vaccination records from your vet before starting daycare or boarding.
3. ___ Owner agrees that the pet shall not leave the kennel until all charges are paid in full to Advanced Pet Services.
4. ___ Owner agrees to be solely responsible for any and all acts or behavior of Owner's pet while it is in the care of Advanced Pet Services.
5. ___ Owner specifically represents that they are the lawful and valid owner of the pet, free and clear of all liens and encumbrances.
6. ___ Owner specifically represents that the pet has not been exposed to rabies or distemper within 30 days prior to boarding.
7. ___ Owner agrees that in the event the boarding charges are not paid when due in accordance with this agreement, Advanced Pet Services may exercise its lawful rights upon ten (10) days written notice by delivering such notice via first-class mail to Owner's Address. A pet that is unclaimed at Advanced Pet Services for ten (10) days beyond its scheduled discharge date is considered abandoned and will become the property of Advanced Pet Services. Every effort will be made to contact Owner if abandonment becomes an issue. If for any reason the pet is not going to be picked up on the scheduled dismissal date, Owner shall contact Advanced Pet Services to make arrangements to extend the animal's stay and will pay the additional charges based upon the aforesaid daily rate.
8. ___ If the pet becomes ill or if the state of the animal's health otherwise requires attention, Advanced Pet Services at its sole discretion, is authorized to engage the services of a veterinarian or arrange for other requisite attention to the animal up to and including \$500.00 or _____, whichever is greater. If a veterinarian determines that emergency treatment, which Exceeds the authorized amount, is needed to save the animal's life or quality of life, and we cannot reach you or the Emergency Contact, we may authorize the veterinarian to perform the emergency treatment. Owner agrees to be responsible for all veterinary costs provided to your animal.
9. ___ Owner authorizes Kennel to use pictures of their Pet taken while participating in Kennel activities on its website and in other promotional materials.

OWNER ACKNOWLEDGES AND AGREES TO THE ABOVE:

Signature and Date

Owner