



Date: _____

OWNER INFORMATION

Owner's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: (_____) _____ Home Phone: (_____) _____

Work Phone: (_____) _____ Additional Owner Phone: (_____) _____

Email Address: _____

How did you hear about us? _____

EMERGENCY CONTACT

1. Emergency Contact Name: _____

Cell Phone: (_____) _____ Home Phone: (_____) _____

2. Emergency Contact Name: _____

Cell Phone: (_____) _____ Home Phone: (_____) _____

Will a 3rd Party have permission to drop-off or pick-up your dog for you? Yes No

If yes, please list the name(s) and number(s) of the person(s) allowed:

Name: _____ Phone Number: (_____) _____

Name: _____ Phone Number: (_____) _____

*3rd Parties should be prepared to show photo identification. Arrangements for payment must be made in advance.

VETERINARIAN

Veterinarian: _____ Phone Number: (_____) _____

Address: _____

PET INFORMATION

1st Dog's Name: _____ Breed: _____ Birthday: _____

Color: _____ Weight: _____ Sex: Male Female Neutered Spayed

MEDICAL INFORMATION

Is your dog currently on flea/tick preventative? NO YES If yes, what type? _____

Does your dog have (or had) any of the following issues:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Poor Eyesight | <input type="checkbox"/> Seizures | <input type="checkbox"/> Heart problems |
| <input type="checkbox"/> Hip Dysplasia | <input type="checkbox"/> Blind | <input type="checkbox"/> Heartworm treatment | <input type="checkbox"/> Liver problems |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Hard of hearing | <input type="checkbox"/> Prone to ear infections | <input type="checkbox"/> Kidney problems |
| | <input type="checkbox"/> Deaf | <input type="checkbox"/> Prone to hot spots | <input type="checkbox"/> Anxiety (storm or separation) |

Does your dog have any allergies? NO YES If yes, please explain:

Please list any medications that your dog is on:

Please describe any medical problems your dog has or has had in the past:

Does your dog have any old or current injuries? NO YES If yes, please explain:

Are there any restrictions of your dog's movements? NO YES If yes, please explain:

It is common for some dogs while they are here for boarding to not eat. In the event your dog does not eat for more than 2 meals are we allowed to add the following enticements to your dog's food?

- | | |
|---|---|
| <input type="checkbox"/> Chicken | <input type="checkbox"/> Peanut butter |
| <input type="checkbox"/> Chicken broth | <input type="checkbox"/> Yogurt |
| <input type="checkbox"/> Pumpkin | <input type="checkbox"/> Hand feed |
| <input type="checkbox"/> Cheese | <input type="checkbox"/> House Food: Life's Abundance |
| <input type="checkbox"/> Other per owner: _____ | |

DOG BEHAVIOR

Has your dog ever attended daycare or been boarded before? NO YES If yes, please describe the experience: _____

Has your dog been to a dog park before? NO YES If yes, please describe the experience: _____

Does your dog have a basic understanding of commands (sit, stay, down, etc.)? NO YES

Is your dog house trained? NO YES

Has your dog ever bitten a person? NO YES If yes, please explain: _____

Has your dog ever bitten another dog? NO YES If yes, please explain: _____

Please check all answers that describe your dog's personality:

- | | | | |
|---------------------------------------|---|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Affectionate | <input type="checkbox"/> Playful | <input type="checkbox"/> Protective | <input type="checkbox"/> Pushy |
| <input type="checkbox"/> Outgoing | <input type="checkbox"/> Reserved | <input type="checkbox"/> Clingy | <input type="checkbox"/> Aggressive |
| <input type="checkbox"/> Confident | <input type="checkbox"/> Submissive | <input type="checkbox"/> Feisty | |
| <input type="checkbox"/> Gentle | <input type="checkbox"/> Verbally sensitive | <input type="checkbox"/> Mouthy | |

Please check all answers that describe your dog's attributes:

- | | | |
|--|---|---|
| <input type="checkbox"/> Jumper | <input type="checkbox"/> Separation anxiety | <input type="checkbox"/> Food aggressive |
| <input type="checkbox"/> Climbs fences | <input type="checkbox"/> Likes to herd | <input type="checkbox"/> Toy aggressive |
| <input type="checkbox"/> Chewer | <input type="checkbox"/> Digger | <input type="checkbox"/> Excessive barking |
| <input type="checkbox"/> Biter | <input type="checkbox"/> Fears noises | <input type="checkbox"/> Excessive mounting |

Please check that describe situations where your dog may become unfriendly:

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Grabbing collar | <input type="checkbox"/> Touching while sleeping | <input type="checkbox"/> Around women |
| <input type="checkbox"/> Touching paws | <input type="checkbox"/> Being brushed | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Touching ears | <input type="checkbox"/> Being hugged | |
| <input type="checkbox"/> Touching tail | <input type="checkbox"/> Around men | |

POOL TIME: is your dog approved for pool-time (swimming in our beach entry pool or kid pool)? YES or NO

Any additional information you would like to share about your dog?

PET CARE SERVICE AGREEMENT

This **Pet Care Service Agreement** (the “**Agreement**”) is made between “**Lush Puppy Pet Resort**” (as defined herein) and the pet owner whose signature appears below (“**Owner**”), who each agree as follows:

1. **DISCLOSURE:** By signing this Agreement and leaving Pet with Lush Puppy, Owner certifies to accurate disclosure of all information provided to Lush Puppy either in writing or orally about the Pet and Owner specifically represents that he or she is the sole owner of the Pet, free and clear of all liens and encumbrances. Owner agrees to disclose to Lush Puppy all known medical conditions and/or behavior problems, which may affect Pet’s care. Owner specifically represents to Lush Puppy that Pet is healthy and meets Lush Puppy’s published vaccination standards. Owner represents that each time Pet is brought to Lush Puppy, Owner is recertifying that Pet is in good health and has not had any communicable illness of any kind for 30 days prior to visit. Owner further agrees to inform Lush Puppy of any changes in Pet’s condition and/or behavior prior to subsequent visits. Lush Puppy reserves the right to refuse service to any Pet for any reason, at any time, including, but not limited to: Pet lacking proof of vaccinations, Pet displaying signs of untreated or potentially contagious conditions and/or Pet exhibiting aggressive or unacceptable behavior. For the purposes of this Agreement, the terms “Pet” refers to all pets under said ownership of Owner who utilize services at Lush Puppy, either now or in the future.
2. **RESERVATIONS AND DEPOSITS:** A confirmed reservations is a reservation that has completed the following requirements: a completed and signed copy of Lush Puppy Pet Care Service Agreement, proof of vaccinations, completed temperament test evaluation, a deposit and valid credit card on file. Reservations require a one (1) night’s advance deposit, except reservations during Holiday periods. Reservations must be cancelled at least three (3) days prior to arrival date, except reservations during Holiday periods. Failure to cancel the reservation at least three (3) days prior to arrival date (including a “no-show”) will result in forfeiture of the entire deposit. Holiday reservations require a \$200 advance deposit. Holiday reservations must be canceled at least two (2) weeks prior to arrival date. Failure to cancel the Holiday reservation at least two (2) weeks prior to the arrival date (including a “no-show”) will result in forfeiture of the entire deposit. A “no-show” reservation is defined as not showing up for your scheduled reservation by the close of business of your check-in day, at which time, the room will be released, the reservation canceled, and the deposit forfeited. For any daycare reservation made there is a \$28 “No Call No Show” fee if you do not call to cancel your daycare reservation the day before or the day of your scheduled reservation. Lush Puppy will cancel reservations due to non-performance by Owner regarding the following items: incomplete vaccinations and/or invalid credit card on file.
3. **PAYMENTS:** Owner agrees to pay the applicable service rates in effect on the date Pet is check-in to Lush Puppy and to pay for any additional services requested by Owner. Payment for all accommodations and additional ancillary services will be paid upon check-out. Prices contained on the services menu are subject to change at the discretion of Lush Puppy, without notice to Owner, and Owner acknowledges and agrees to pay such prices as amended.
4. **EXTENDED STAY PAYMENTS:** Stays exceeding two weeks require payment of services after the first two (2) weeks, and then at the end of each week thereafter. Client must maintain a valid credit card on file to be charged accordingly.
5. **ASSUMPTION OF RISK:** Lush Puppy agrees to exercise reasonable care of Pet during its stay and, if applicable, during transport. Owner is aware that employees of Lush Puppy are not veterinarians and do not have backgrounds in animal medicine and are not expected to diagnose or detect illnesses in the Pet at Lush Puppy. Owner acknowledges that no

amount of vaccination requirement, sanitation or personalized care can prevent pets from contracting an airborne virus or communicable disease. Owner further understand that Pets are pack animals, lead with their teeth, paws/claws, are unpredictable in nature and no amount of supervision can be 100% certain to prevent Pets from being injured. Owner understand these risks of illness, disease or harm and hereby release Lush Puppy, its employees, members, or other agents, from any and all losses, damages, costs and expenses arising out of or in connection with any communicable disease, airborne virus, or any other medical condition or injury contracted by Owner's Pet at Lush Puppy. Furthermore, if Pet is transported to or from Lush Puppy by the Lush Puppy staff, Owner holds Lush Puppy harmless in event of injury or accident during transportation.

6. **EMERGENCY/MEDICAL ATTENTION:** In the event your pet should need medical treatment while in the care of Lush Puppy, we will make every effort to contact you. If you are not available, we will attempt to contact your pet's veterinarian. Should time permit and it is safe to do so, we will transport your pet to your veterinarian. However, if there is an emergency, your pet may be taken to an Emergency Veterinary Hospital, or a veterinarian of Lush Puppy's choice. All expenses incurred due to your dog's accident or illness must be paid in full at the time of discharge from Lush Puppy. There will be a \$50 trip charge per visit to the veterinarian.
7. **PROPERTY DAMAGE:** Lush Puppy reserves the right to charge an additional property damage fee for Pets that damage Lush Puppy rooms and suite. Property damage includes damage or destruction of beds, walls, doors, etc. To avoid the potential of any unexpected fees, Lush Puppy strongly recommends that clients who believe their Pet(s) may cause property damage to speak with a Lush Puppy staff member to determine the best room type and amenities for their Pet(s).
8. **MARKETING:** Owner agrees that the names, likenesses of Owner, Owner's family, Owner's agents or representatives and Owner's Pet(s) may be used on Lush Puppy's website, social media, and within other advertising and promotional materials, including but not limited to, news programs as well as any other press, media, radio, television and/or Internet coverage within the sole discretion of Lush Puppy.
9. **CREDIT CARD AUTHORIZATION:** I, (the "Owner"), authorize Lush Puppy and its representatives to obtain medical treatment in the event of an illness or accident for my Pet(s). I give the attending veterinarian permission to start medical treatment without my verbal consent. In the event that medical expenses exceed \$_____ (ex. \$500 min. - \$3,000 max. – if left blank then there is no limit), I request that a Lush Puppy representative or the attending veterinarian to contact me before any further treatment is done. I agree to reimburse Lush Puppy for any and all expenses incurred for the medical treatment of my pet.

Visa MasterCard AMEX Credit Card Number: _____
Expiration Date: _____ Code: _____ Zip Code: _____

My signature below authorizes the use of my credit card not only for required veterinary treatment but to have on file to make a boarding reservation and provided deposit upon booking.

I have read, understand, and agree to abide and be bound by the terms and conditions in this agreement.

Signature: _____ Date: _____