

# THE DOG LOFT

I, (client/owner) \_\_\_\_\_, do hereby entrust The Dog Loft to care for my (breed/name) \_\_\_\_\_ for its boarding stay from (date/range) \_\_\_\_\_ and agree to all of the terms listed hereafter. I authorize The Dog Loft to do whatever they deem necessary for the health and well being of (pet name) \_\_\_\_\_. I agree to pay for any and all expenses relating to the same.

I certify that (pet name) \_\_\_\_\_ VACCINATIONS ARE/ARE NOT (circle one) current. If said vaccinations are not current, I agree to hold The Dog Loft harmless for any illness relating to my pet's lack of proper vaccinations. I have read the rates and pricing sheet and I agree to pay board at the rate of \$ \_\_\_\_\_ per day base rate, plus any and all add ons, less any applicable discounts. \_\_\_\_\_ (initial)

I realize that pickup/drop off after (pickup -drop off) \_\_\_\_\_, will result in my being charged for a complete (full) day's board at a rate of \$ \_\_\_\_\_. I realize that if grooming is requested, my pet's grooming will be completed by 11:00 AM on the day of pickup/drop off and I will be charged the additional fee of the grooming expenses. I agree that I am solely responsible for any and all damage that your pet may cause to the residence, owners, other pets, or itself through illness, malicious, or improper conduct. I have asked and had answered any and all of my questions regarding my pet's stay, cleanliness, health, and safety. \_\_\_\_\_ (initial)

In case the need for emergency medical care should arise for (pet name) \_\_\_\_\_ I authorize The Dog Loft to do whatever they deem necessary to have your pet treated by a veterinarian during his/her stay, I will be fully responsible for any and all charges incurred by such treatment. Should I be unable to be contacted within one (1) hour of my pet's admission for veterinary care, I authorize The Dog Loft to act on my behalf and acknowledge that in certain critical issues where a decision regarding "heroic care" is required for my pet, that I grant The Dog Loft full and complete authority to evaluate the required medical needs with a veterinarian and make an informed decision as to the need of any and all medical requirements of that situation. I authorize The Dog Loft to act in such a situation and I agree to hold harmless, The Dog Loft or its employees from such charges or actions. Furthermore, should I desire to limit the amount of veterinary treatment to an approximate dollar amount, I will provide that amount here \$ \_\_\_\_\_. If you can not leave an emergency contact number you are required to contact your vet and provide him with emergency treatment instructions! Your signature below hereby authorizes that you have read and understand all of the above information and agree to these terms and conditions. \_\_\_\_\_ (initial)

I have read this agreement on (date), understood its terms, and signed it freely.

SIGNATURE OF OWNER or OWNER'S AGENT: \_\_\_\_\_

EMERGENCY TELEPHONE # WHILE AWAY: \_\_\_\_\_

## NON-OWNER DISCHARGE PERMISSION CONTRACT

(This Contract Is Intended To Be Used When Someone Other Than The Owner(s) Of Record Will Be Picking Up Your Pet. You Should Fill Out the Top Portion Of the Contract. The Person Picking Up the Pet Will Fill Out The Bottom Portion Of The Contract At The Time They Pick Up Your Pet. If You Have Multiple Pets Please Fill Out A Contract For Each Pet. You Should Prepay At The Time You Drop Off Your Pet Or Provide The Pick Up Person With A Means Of Payment. Check or cash preferred.

I/We, (client/owner) \_\_\_\_\_, give complete and full permission to: Kelly Winkleman

To pick up my: (Breed) \_\_\_\_\_, (Named)\_\_\_\_\_.

Signed: (Owner)\_\_\_\_\_

Date: \_\_\_\_\_

Their Phone Number Is:\_\_\_\_\_

I, the undersigned, herewith accept Any and All responsibility for (client/owner) \_\_\_\_\_, pet, (pet name) \_\_\_\_\_ . The Dog Loft requires the owner's written signature for release of any pet to anyone other than the owner of record, (client/owner) \_\_\_\_\_. I herewith acknowledge that I have been given complete and full permission to pick up (pet name) \_\_\_\_\_ by the owner of record, (client/owner) \_\_\_\_\_.

I further acknowledge that I have inspected your pet and have found him/her to be in sound condition and suffering from no ailments at the time of my assuming care and custody of your pet. I further certify that I have inspected your pet and have found him/her to be healthy, clean and free of parasites at the time of his/her departure.

I acknowledge that I have read this agreement and have signed it freely.

Signed: \_\_\_\_\_/The Dog Loft

Date: \_\_\_\_\_

**NON-OWNER ADMISSION PERMISSION CONTRACT**

(Note this and the standard admissions contract above must be completed)

I, the undersigned, gave complete and full permission to: Aisha Macias whose telephone number is: 209-471-0979 to drop off my (breed/name) from his/her boarding stay with The Dog Loft.

I, (client/owner), acknowledge that I have inspected (pet name) and have found him/her to be in sound condition and suffering from no ailments at the time of my assuming care and custody of (pet name) I further certify that I have inspected (pet name) and have found him/her to be healthy, clean and free of parasites at the time of his/her arrival.

I acknowledge that I have read this agreement and have signed it freely.

\_\_\_\_\_ (Owner's Signature)

\_\_\_\_\_ (Date)

\_\_\_\_\_ (Driver's Signature) The Dog Loft

\_\_\_\_\_ (Date)