

Doggie's Wonderland

460 Independence Pkwy. Plano, TX 75074
(972) 881-1905, Fax (972) 596-0680

120 E. Bethel School Rd. Coppell, TX 75019
(972) 745-9100, Fax (972) 393-1079

Client Information: Owner's Name: _____

Address: _____, _____, _____, _____
City State Zip

Cell Phone: (____) _____ - _____, E-mail (for news & promotion): _____@_____

* Who else are authorized to pick up my dog(s): _____

* I allow _____ to share kennel & be fed together with my dog(s) _____ (Please initial)

How did you learn about us: ___ Drive by, ___ Internet, ___ YELP, My Vet: _____

Event: _____, Referral By: _____, Other: _____

Emergency Contact (other than yourself)

Name: _____, Phone: (____) _____ - _____

Your Vet: _____, Phone: (____) _____ - _____

Terms and Conditions of Agreement

1. I understand that I am solely responsible for any harm caused by my dog (s) while my dog(s) is/are attending Doggie's Wonderland ("DW"). I also agree that if I fail to provide proof of updated vaccinations or if vaccinations are expired, DW has the right to refuse service.
2. I understand and agree that DW is relying on my representation of my dog(s) is/are in good health condition and behavior including but not limited to showing aggression or threatening behavior toward any other person or any other dog. **Further, I understand and agree that DW and their staff will not be held responsible for injury to my dog(s) attendance and participation at DW and I release and hold DW harmless of any liability whatsoever.**
3. I understand that due to DW's open play environment and the natural behavior of dogs, scratches, scrapes or bite wounds could accidentally occur, and agree that any medical emergency that may develop with my dog(s) will be treated as deemed best by DW's staff, at their sole discretion, and that I will assume full financial responsibility for any and all expenses involved. DW offers a Dog Bite Injury Reimbursement (DBIR) Plan, at the rate of \$1 a day, which covers all dog bite injuries caused by other dogs while staying at DW (up to a limit of \$500 in expenses). I understand that for consideration of a reimbursement, it is my responsibility to report the dog bite injury with clear evidence within the first 24 hours after picking up my dog(s). **I understand that this DBIR Plan is being offered for my benefit and that DW's offer or my decision to accept it or not does not in any way change my release and agreement to hold DW harmless of any liability whatsoever as stated in Section 2 above.** _____ (Please initial)
I was offered the DBIR Plan, but I decline the offer. _____ (Please initial)
I don't like the "Open Play" concept and I don't want my dog(s) to play and social with other dogs. I understand my dog(s) will be kenneled and be taken out for potty breaks every hour. _____ (Please initial)
4. **I hereby release, hold harmless and discharge DW, its officers, directors, owners, employees or its assigns from all actions, claims or demands that I, my legal representatives, guardians, heirs or assigns now have or may in the future have for injury, loss, damage from disease, death, running away, theft, fire, injury to persons, injury from other dogs, to my dog resulting from my dog's activities at DW whether or not resulting from the negligence, gross negligence or misconduct of any person, or the actions of another animal. I also agree to indemnify, defend and hold harmless DW, its officers, directors, owners, employees and/or its assigns, from any and all claims due to any damage the pet may cause to any person or other animal while on the DW premises.** In the event DW deems it necessary to employ legal counsel to protect their rights under this agreement, the owner/agent of the dog agrees to pay all expenses incurred by DW to enforce their rights under this agreement including but not limited to costs and reasonable attorneys fees.
5. I understand that Doggie's Wonderland reserves the right to deny admittance, and/or remove from the premises, or segregate any pet at their discretion. In the event that my pet needs to be removed from the premises, Doggie's Wonderland will attempt to contact me at the numbers provided. In the event I cannot be reached or my emergency contact cannot be reached, Doggie's Wonderland may proceed with removal of my dog to my authorized veterinarian.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and DW.

Name of Owner (print) _____

Signature of Owner: _____ Date: ____ / ____ / ____

Dog Profile

Dog's Name: _____, Breed or Mix: _____

Date of Birth: ___ / ___ / ___, Sex: ___ Male (Neutered: ___ Yes, ___ No), ___ Female (Spayed: ___ Yes, ___ No)

Coat Color: _____, Weight: _____, Tattoo: _____

Microchip No: _____, Distinguishing marks or characteristics? _____

If you have more than one dog, do you allow them to share the same kennel & be fed together: ___ Yes, ___ No

Feeding

DW will provide dog food for boarding dogs. Dog(s) with medical reasons, special needs, or if you would like your dog(s) to stay on his/her own diet or dog(s) has sensitive stomach (change food may cause diarrhea), please bring your own dog food.

Amount per feeding: _____ Per day: ___ Morning, ___ Noon, ___ Evening

Special instruction: _____

Any treats your dog(s) may not have or allergic to? ___ No, ___ Yes, what are they? _____

Behavior

Has your dog been in daycare/boarding before? ___ No, ___ Yes, how did it behave? _____

Has your dog been to a dog park before? ___ No, ___ Yes, how did it behave? _____

Has your dog been socialized with other dogs? ___ No, ___ Yes, how did it reacts: _____

Has your dog ever bitten someone? ___ No, ___ Yes, what's the circumstance? _____

Has your dog ever been bitten? ___ No, ___ Yes, what's the circumstance? _____

Does your dog have any problems in the following areas? If yes, please describe.

1. Barking ___ No, ___ Yes; _____
2. Digging ___ No, ___ Yes; _____
3. Jumps up ___ No, ___ Yes; _____
4. Destructive chewing ___ No, ___ Yes; _____
5. Housetraining ___ No, ___ Yes; _____
6. Shy or Nervous ___ No, ___ Yes; _____
7. Runs away ___ No, ___ Yes; _____

Has your dog had obedience training? ___ No, ___ Yes, commands your dog knows: _____

Please add any comments or information that you feel might be helpful: _____

Health Condition

What is the current health condition of your dog? ___ Excellent, ___ Good, ___ Fair, ___ Poor

What flea/tick/parasite control do you use? _____

Please attach a copy of most recent vaccinations.

It is the owner's responsibility to inform Doggie's Wonderland of any existing health conditions or any new health conditions as they are identified. On admission, all dogs must be free from any conditions that could potentially jeopardize other dogs. Dogs that have been ill with a communicable disease in the last 30 days will require veterinary certification of health to be admitted or readmitted.