



## Owner Information:

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Vacation Phone: \_\_\_\_\_ Emergency: \_\_\_\_\_  
Email Address: \_\_\_\_\_

How did you hear about The Dog House? \_\_\_\_\_  
Do you want your pet groomed while boarding? \_\_\_\_\_  
Would you like us to give your dog a special treat each day? \_\_\_\_\_  
Has your pet ever been in a daycare or a kennel? \_\_\_\_\_  
Is your pet social with other animals? \_\_\_\_\_

## Pet Information:

Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Birthday: \_\_\_\_\_  
Breed: \_\_\_\_\_ Spayed/Neutered: \_\_\_\_\_ Vet: \_\_\_\_\_  
Feeding schedule: \_\_\_\_\_  
Any medication taken daily? \_\_\_\_\_  
Commands: \_\_\_\_\_  
Allergies? \_\_\_\_\_ Sensitive areas? \_\_\_\_\_  
Favorite petting area? \_\_\_\_\_ Favorite toy/game? \_\_\_\_\_

Does your pet have any problems with:  
Houstraining: \_\_\_\_\_ Barking: \_\_\_\_\_ Digging: \_\_\_\_\_  
Ignoring commands: \_\_\_\_\_ Destructive behavior: \_\_\_\_\_  
Chewing toys/beds: \_\_\_\_\_ Sharing toys/water: \_\_\_\_\_

Any other special or unique info about your pet: \_\_\_\_\_  
\_\_\_\_\_

# Customer Agreement

I understand that while at The Dog House, Inc., my pet will interact with people and other pets. I am aware that with the interaction of other pets, there is a chance of injury or even death. As the owner of the above referenced pet(s) I understand that The Dog House, Inc., its owners, employees, directors, and agents will exercise due care to protect the health and safety of my pet, while in their care. I agree to assume all risk of injury to my pet(s) while in the custody of The Dog House, Inc.

I give my permission for those in charge to take whatever steps are necessary to obtain medical treatment for my pet(s) and I agree to pay all charges incurred. I consent to the veterinarian of The Dog House's choice and in the event of an emergency. I consent to any veterinarian being retained to render care for my pet(s). In the event of death, my pet will be held at the veterinarian of The Dog House's choice until I return.

In the event my pet causes injury to another pet or to a person while in the custody of The Dog House, Inc., I agree to indemnify The Dog House from any action which might be brought against it, or any defense, settlement, or judgments entered against it. I will assume all liability for the actions of my pet(s).

I agree not to file legal charges against The Dog House, Inc., its owners, employees, directors, or agents for any injury, death, or loss of my pet without first asserting my claim directly to The Dog House, Inc. I hereby waive and release The Dog House, Inc., its owners, employees, officers, and agents from any and all liability of any nature of injury, death, or loss of my pet(s) resulting from The Dog Houses actions or from the actions of my pet(s) or any other pet while in the custody of The Dog House, Inc.

Printed Name \_\_\_\_\_  
Pet(s) \_\_\_\_\_

Signature \_\_\_\_\_  
Date \_\_\_\_\_

**Sorry, No refunds for early pickups,  
no shows, or late arrivals. You pay for  
the time you reserve. Thank you.**