

HOUND HAUS

Boarding

Daycare

Grooming



Dog Owner's Name _____

Address: _____

City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____

Email _____

Emergency Contact _____ Number _____

Dog's Name _____ **Breed** _____

Male ___ Female ___ Spayed/Neutered ___

Dog's Birthday _____

Dog's Name _____ **Breed** _____

Male ___ Female ___ Spayed/Neutered ___

Dog's Birthday _____

Has your dog been at a boarding facility in the last 30 days Yes ___ No ___

Vaccinations – Please provide vaccination documentation and medical records.

The HOUND HAUS will not accept dogs that are not current on vaccinations and flea control.

Please list the current expiration dates for the following vaccinations

Bordatella _____ DHLPP _____ Rabies _____

Method of Flea Control _____ Last application _____

Are there any special instructions for your dog? For example – do they bite, are they aggressive towards people or other dogs, special instructions regarding health and diet, etc.

If so, please list _____

Medical Emergency Information

Veterinarian's Name/Clinic _____ Phone _____

Address _____

Please describe any medical or physical problems, including allergies _____

_____ By initialing here, you agree to be solely responsible for the payment of all medical bills for your dog and you release HOUND HAUS and all employees from any and all responsibility for, or claims, damages, debts, arising out of or related to such medical care, including, but not limited to, transportation to/from the veterinary clinic and choice of veterinarian and animal hospital.

Medications? Yes _____ No _____

If yes, medication name _____

Why is your dog on medication? _____

Medication Instructions: _____



FEEDING:

How often do you feed your dog? Morning____ Evening____ Both____

____Eats all food at mealtime

____Nibbles throughout day

____Goes for periods without eating

Food provided by Owner____

Hound Haus_____

HOUND HAUS uses Purina Pro Plan at \$1.00 per feeding

If extra preparation is needed to feed your dog, additional fees will be added.

HOUND HAUS

Policies and Legal Information

Please read and initial each section

____ EMERGENCY MEDICAL CARE: If, in our judgement, your dog requires immediate medical care and we are unable to reach you, your emergency contact, or do not have time to reach you, we will take your dog to a veterinarian or animal hospital. We will do our absolute best to take the dog to the veterinarian of your choice, but if we deem it necessary we will take the dog to our on call veterinarian, Dr. Jodi Bainter in Chester, IL.

____ Save my pet regardless of the cost of any necessary treatment, medication, or surgical procedure.

____ Use any and all reasonable and customary treatments, medications, or surgical procedures necessary to treat my pet, not to exceed \$_____.

____ I do not want my pet treated by a veterinarian **under any circumstances**, even in a life threatening situation.

____ By initialing here, you agree to be solely responsible for the payment of all medical bills for your dog and release the HOUND HAUS from any and all responsibility for them.

____ HOUND HAUS reserves the right to immediately change your dog's type of boarding if we believe it is necessary to protect the health and well-being of your dog, other dogs, or our staff.

____ If your dog is exhibiting any symptoms that may suggest illness such as sneezing, coughing, wheezing, runny eyes or nose, vomiting, lethargy, or diarrhea, please do not bring your dog for boarding. If your dog comes into heat while boarding you will be charged an extra \$25 per day.

____ Dogs with flea or tick problems will be treated at the owner's expense.

____ I acknowledge and understand that there are certain risks involved in boarding, including but not limited to dog fights, dog bites to humans or other dogs, and the transmission of disease. Any medical expenses will be pet owner's responsibility and I release the HOUND HAUS of any and all charges.

____ All charges must be paid in full upon pick up of your dog. Dogs will not be released until payment is made. Dogs left thirty days beyond the agreed pick up date will become property of HOUND HAUS and will be handled at the kennel's discretion.

____ Owners are welcome to bring their dog's own bedding or toys if desired. HOUND HAUS is not responsible for the condition of the items at pick up.

____ All dogs must be healthy and current on all vaccinations. Owners must provide proof of updated vaccination records from your vet before you start daycare or board with us to ensure your dog's safety as well as that of other HOUND HAUS dogs.

____ Group Activity: Dog owner understands that while your dog is staying at HOUND HAUS, he or she will come into contact with other dogs. Every effort will be made to ensure the safety of our guests. Dog owner acknowledges that, in the unlikely event your dog is injured by another dog, you release HOUND HAUS from any liability for such injury. If your dog injures another dog, you will be solely responsible for any injury to the other dog (s) as well as your own dog, and you release HOUND HAUS from any liability for such injury.

____ Dog owner agrees to allow HOUND HAUS to use his or her dog's name and/or image or likeness taken while the dog is staying at HOUND HAUS, in any form or format, for use, at any time, in any of our media, marketing, advertising, illustration, trade or promotional material.

____ Pick up and drop off times are as follows:

HOUND HAUS is based on our home property. We ask that you please respect our privacy and abide by the hours we have posted.

Pick Up/Drop Off Hours:

Monday – Saturday

7:00 a.m to 10:00 a.m.

3:00 p.m. to 6:00 p.m.

And Sunday

3:00 p.m. to 6:00 p.m.

_____ The HAUS brand of dog food is Purina Pro Plan. If you are feeding any other food and would like to, you may bring it with you. Changing your dog's food can cause an upset stomach. If HOUND HAUS has to supply dog food, there will be a \$1 per feeding charge per dog per day. Also, if extra preparation is needed for the food for your dog, additional charges could be applied.

_____ Medication will be administered to your dog as needed and outlined in your contract

_____ This agreement covers the current relationship between the HOUND HAUS and yourself as the pet owner. Each time you bring your dog to HOUND HAUS, you affirm the terms of this agreement, and the truthfulness and accuracy of all statements you make in this agreement.

Signature

Date

Requirements

Proof of current vaccinations from a veterinarian or vaccine clinic.

Bordetella: due every 12 months and was administered at least 24 hours prior to arrival.

We cannot be held responsible for a kennel cough outbreak. We take great care of making certain all pets are up to date on all vaccines. Bordetella vaccine is comparable to human vaccines and MAY NOT cover ALL strains of kennel cough. Please check with your vet if you have any questions.

DHLPP - Distemper

Rabies Vaccine

In good health and friendly with other dogs and people.

Free from fleas and ticks and on current flea prevention.