

Very Important Pets
Canine Boarding Kennel Agreement

Last Name _____ First Name _____
Dog's Name/s _____ Breed/s _____
Birthday/s _____ Age/s _____ Main Colour/s _____
Gender/s _____ Spayed/Neutered _____ (Additional fees apply to in heat females)
Address _____
Home Phone _____ Cell Phone _____ Partner name & Cell _____
Veterinarian _____ Phone Number _____
I am the legal owner of the Dog/s described above _____
Emergency Contact (Someone who can pick up your dog/s in the unlikely event this is necessary and can help make medical decisions if you can't be reached)
Name _____ Phone _____
I authorize the following people to pick up my dog/s _____

Amount of food in AM _____ Amount of food in PM _____ Or Free Choice _____
Brand of food _____ Special Feeding instructions _____
Does/do your dog/s have any allergies? Yes _____ No _____ Please Explain _____

Is/are your dog/s allowed treats other than those provided? Yes _____ No _____
Does/do your dog/s have any medical conditions? Yes _____ No _____ Please Explain _____

Does/do your dog/s require any medications? _____
Can your dog/s jump a 6ft fence? _____
Will your dog/s dig in an attempt to get out of their kennel? Yes _____ No _____
Does/do your dog/s have any fears such as loud noises? _____
Will your dog/s ingest anything other than food? _____
Does/do your dog/s eat or chew bedding? _____ Is your dog allowed to have bedding? _____
Has/have your dog/s ever bitten or threatened to bite a person? Yes _____ No _____ Please Explain _____

Does/do your dog/s have any behaviours we should be aware of? Yes _____ No _____
Please Explain _____
Are you the first owner of your dog/s or do you have any history we should be aware of? _____

Additional fees apply if you wish for your dog/s to be evaluated for daycare. Please request the daycare waiver as well. _____

Please add any other information that will help us to make your dog/s stay more comfortable.

Please initial to indicate that you have read and understand each point.

1. I will disclose any previous or current medical issues or concerns of my dog/s and will keep Very Important Pets informed of any changes in my dog/s health. _____
2. My dog/s is/are current on required vaccines (rabies, DHLPP) is free of fleas, ticks, and parasites and has not been ill with any known contagious viruses in the last 30 days. _____
3. I agree to allow a 7 day waiting period after my dog/s has/have had their vaccinations to allow the vaccines to reach full potential and ensure that my dog/s has/have not had any negative reactions to the vaccines. _____
4. I understand that while my dog/s is/are fully vaccinated that vaccines are not guaranteed and there is a small risk my dog/s may contract a contagious disease or illness. I agree that if this should occur I am responsible for my own dog/s care and medical attention. _____
5. If any health issues should occur during my dog/s stay at Very Important Pets we will do our best to contact you however these issues will be treated as deemed best by the staff of Very Important Pets within their sole discretion. _____
6. I allow Very Important Pets to contact my veterinarian or another accessible vet clinic as deemed necessary should any injuries or health conditions require medical attention. _____
7. I agree that I am solely responsible for any medical expenses acquired for my dog/s and authorize charges up to \$_____. _____
8. In the event that I and my emergency contact are not reachable I authorize Very Important Pets, with the guidance of the veterinarian, to make decisions on my behalf. _____
9. I release Very Important Pets, Its staff. Owners, representatives and agents from any and all liability which I or my dog may suffer including but not limited to injury, sickness, damage, running away, theft, fire or death resulting from my dog/s participation in overnight boarding, daycare or grooming. _____
10. I understand that if my dog requires grooming services, my dog(s) is/are at risk for skin irritation, shampoo in the eyes, cuts, scratches, cutting of the nail quick etc. _____
11. I accept financial and legal responsibility for any damages to the facility caused by my dog/s actions. _____
12. Very Important Pets reserves the right to remove/refuse any dog from boarding/daycare. _____
13. I understand that drop off and pick ups must be made during business hours or by pre arranged appointment for an additional fee. _____
14. I understand that payment is required upon pick up. _____
15. I understand that Very Important Pets reserves the right to charge additional fees for services that we consider over and above the typical care covered by our standard rates. _____
16. I understand that in the event of abandonment Very Important Pets will try to contact the owner. If after 2 weeks (written registered notice will be given where possible) the owner is not located, the animal will be placed in a new home, sold or other situation at the kennel owner's discretion _____
17. I allow Very Important Pets to use my dog/s pictures on their website, Facebook page, Instagram and other materials. Yes _____ No _____ After my dog/s goes/go home _____

Signature of Owner/Representative _____ Date _____
Very Important Pets Representative _____ Date _____