Sandy Ridge Kennels Boarding Application

Please Print

HOME PHONE		DATE		
CELL				
Arrival Date	 Departure Date			
OWNER'S NAME		_		
MAILING ADDRESS		_		
STREET ADDRESS		_		
CITY		STATE	ZIP	
EMPLOYER	WORK PHONE			
PET'S NAME	PET'S NAME	PET'S NA	AME	
BREED	BREED	BREED		
COLOR	COLOR	COLOR		
AGE	AGE	AGE		
SEX	SFX	SEX		
NEUTERED/SPADE		OLX		
WEIGHT	AGE SEX			-
IF YOU HAVE A URGENT ARE AVAILABLE THE CHAEMERGENCY CONTACT IF YOU ARE BOARDING NINDIVIDUAL ROOMS? YEWHERE DOES YOU DOGDO YOU ASSURE THAT YOU FECAL)?	RECEIVE ITS VACCINES OUR DOG IS UP TO DATE ON	HAN KENNEL HOUF NNEL HOURS FOR F 	PICK UP OR DROP SHARE A ROOM NES (DISTEMPER,	OR WILL THEY REQUIRE BORDETELLA, RABIES AND
BASIC BOARDING RATE: any dog over 50lbs . SECOND DOG ADDITION, FEEDING. MUST BE IN T SEPARATE AND YOU WIL	18.00 DAY Second Dog v AL 8.00 DAY IF UNDER 50 F HE SAME HOUSE TOGETHE L PAY FOR TWO RUNS !!! No Must be in prescrip	POUNDS AND REQU R ALL THE TIME. II	JIRES NO DIFFERE F THEY HAVE ANY	INT NEEDS INCLUDING PROBLEMS WE WILL
FOODDRY	CAN BO1	ГН WHE	EN TO FEED	HOW MUCH
ARE NOT RESPONSIBLE ADDITIONAL CONSIDERA	ERING ITEMS FROM HOME FOR ANY DAMAGED ITEMS. ATIONS IN THE CARE OF YOU			
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- 1. OWNER AGREES TO PAY ALL THE COST FOR SERVICES REQUESTED FOR THE PET DURING THE TIME IT IS IN THE CARE OF THE FACILITY.
- 2. OWNER FURTHER AGREES THAT THE ANIMAL SHALL NOT LEAVE THE FACILITY UNTIL ALL CHARGES ARE PAID TO THE BOARDING FACILITY.
- 3. SHOULD THE PET BECOME ILL OR THE STATE OF THE ANIMAL'S HEALTH REQUIRE PROFESSIONAL ATTENTION, THE BOARDING FACILITY, AT IT SOLE DISCRETION MAY ENGAGE THE SERVICES OF A VETERINARIAN OR ADMINISTER MEDICINE OR GIVE OTHER REQUISITE ATTENTION TO THE ANIMAL AND THE EXPENSE THEREOF SHALL BE PAID BY THE OWNER.
- 4. THE BOARDING FACILITY SHALL EXERCISE REASONABLE CARE FOR THE PET DELIVERED BY THE OWNER, TO THE FACILITY, FOR BOARDING. IT IS EXPRESSLY AGREED BY THE OWNER AND THE BOARDING FACILITY THAT THE BOARDING FACILITY'S LIABILITY SHALL IN NO EVENT EXCEED THE LESSER OF THE CURRENT CHATTEL VALUE OF THE PET OF THE SAME SPECIES OR THE SUM OF \$200.00.
- 5. THE OWNER AGREES TO BE SOLELY RESPONSIBLE FOR ANY AND ALL ACTS OF BEHAVIOR OF SAID PET WHILE IT IS IN THE CARE OF THE FACILITY.
- 6. ALL CHARGES INCURRED BY THE OWNER SHALL BE PAYABLE UPON PICK UP OF THE PET. THE BOARDING FACILITY SHALL HAVE, AND IS HEREBY GRANTED, A LIEN ON THE PET FOR ANY AND ALL UNPAID CHARGES AT PRIVATE OR PUBLIC SALE OR ANY OTHER METHOD THE FACILITY DEEMS APPROPRIATE, IN THE SOLD DISCRETION OF THE FACILITY AND OWNER SPECIFICALLY WAIVE ALL STATUTORY OR LEGAL RIGHTS TO THE CONTRARY. IF SUCH SALE SHALL NOT SECURE A PRICE ADEQUATE TO PAY CHARGES, THE OWNER SHALL BE LIABLE FOR THE DIFFERENCE.
- 7. THE OWNER SPECIFICALLY REPRESENTS TO THE FACILITY THAT THE PET HAS NOT BEEN EXPOSED TO RABIES, PARVO OR DISTEMBER WITHIN 30 DAYS PRIOR TO CURRENT SERVICES AND FURTHER SAID PET HAS RECEIVED AN ANNUAL RABIES, DISTEMBER, PARVO AND CANINE COUGH VACCINATION WHICH CAN BE CONFIRMED BY THE VETERINARIAN LISTED ON THE PERMANENT COMPUTER OR THE ORIGINAL BOARDING CONTRACT.
- 8. ANY PET ARRIVING WITH FLEAS OR TICKS WILL BE TREATED AT THE OWNERS EXPENSE. IF WE KNOW THIS AT CHECK IN THE ANIMAL WILL NOT BE ADMITTED.
- 9. IF ADDITION, THE BOARDING FACILITY RESERVES THE RIGHT TO REFUSE SERVICES AT ANY TIME FOR ANY REASON REGARDLESS OF RESERVATIONS OR PRIOR ARRANGEMENTS.
- 10. No refunds for early pickup. If you book 5 days then you pay for 5 days regardless of the pickup.

I HAVE READ AND AGREE TO THE TERMS AND POLICIES LISTED ON THIS FORM. I CAN VERIFY THAT ALL THE
INFORMATION, INCLUDING CURRENT VETERINARIAN IS ACCURATE. IF THERE HAS BEEN ANY CHANGE IN MY
ADDRESS, TELEPHONE NUMBER, VETERINARIAN, OR OTHER INFORMATION, I WILL NOTIFY THIS FACILITY OF THOSE
CHANGES. I HAVE NOTED THE BUSINESS HOURS AND AM AWARE OF THE CHARGES FOR THE SERVICES THAT MY
PET(S) WILL INCUR DURING THIS STAY.

SIGNED	DATE
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