



Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Registration

**Owners Name** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact(s) \_\_\_\_\_ Phone \_\_\_\_\_

**Pet Name** \_\_\_\_\_ **Breed** \_\_\_\_\_ **Age** \_\_\_\_\_

D/O/B \_\_\_\_\_ Male/female

Neutered/Spayed Y / N Vaccinations: \_\_\_ Rabies \_\_\_ Distemper \_\_\_ Bordetella (kennel cough)

Vet \_\_\_\_\_

Medical Problems / Special Conditions / Allergies:  
\_\_\_\_\_

**Daycare and Boarding Only Continued**



Has your dog attended a daycare program? Y / N If yes, where? \_\_\_\_\_

Was your dog removed for any reason? \_\_\_\_\_

Dogs Behavior:

Bad experiences with other dogs? \_\_\_\_\_

Has your dog ever bitten a person or another dog? Y / N

Any **known** aggressive behavior regarding:

\_\_\_ Men/Women \_\_\_ Food \_\_\_ Leash \_\_\_ Small/Large dogs \_\_\_ Other \_\_\_\_\_

Anxiety Triggers? \_\_\_\_\_

Body handling issues? (ex: feet, collar area) \_\_\_\_\_



# Service Agreement

I, \_\_\_\_\_, hereby certify that my dog(s) \_\_\_\_\_ is (are) in good health, and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) has/have neither harmed nor shown aggressive or threatening behavior toward any person or any other dog. I have read and I understand the following:

1. I understand that I am solely responsible for harm caused by my dog(s) while my dog(s) is/are attending Stay & Play
2. I further understand and agree that in admitting my dog(s) to Stay & Play, the staff has relied on my representation that my dog(s) is/are in good health and has/have not harmed nor shown aggressive or threatening behavior toward any person or any other dog.
3. I further understand and agree that Stay & Play is a cage free facility and my dog(s) will play in open areas with other dog(s). I accept the risks involved and agree that Stay & Play and its staff will not be liable for any problems which develop (provided reasonable care and precautions are followed) and I hereby release them of any liability of any kind whatsoever arising from my dog(s) attendance and participation at Stay & Play
4. I further understand and agree that any problems, which develop with my dog(s), will be treated/handled as deemed best by the staff of Stay & Play at their sole discretion and that I assume full financial responsibility for any and all expenses involved.
5. I further understand and agree that that if my dog displays aggressive behavior, that for the safety and health of my dog and others, my dog will either be confined to a separate room (with human attention), for a portion of or the remainder of his/her stay with no offset or deduction in price, or be disqualified as a Stay & Play customer.
6. I further understand and agree that Stay & Play may record or reproduce the image and sound of my dog(s) while at our facility, and Stay & Play shall own all rights, title and interest in the imagery. I further agree and consent that my dog(s) may be used by Stay & Play to advertise, publicize or otherwise promote Stay & Play

**I certify that I have read and understand the policies of Stay & Play as set forth on the preceding pages and that the information I have provided is true to the best of my knowledge; and that I have read and understand the conditions and statements of this agreement including the following:**

**Fees:** I understand that fees are based on packages purchased and all policies of refund are posted on our website or can be available upon asking.

**Day Play -Days and Hours (no reservations necessary):** I understand that the days and hours that Stay & Play is open for daycare are Monday through Friday 7:00 AM to 6:00 PM Monday through Friday and 7:00AM to 5:00PM on weekends. I also understand that Stay & Play is closed to the public at 6:00 PM.

**Boarding Reservations:** I understand that as a smaller, personal facility, Stay & Play must rely on reservations so that our numbers remain consistent therefore last minute or consistent cancellations will result in loss of deposit or store credit and possibly the ability to book for boarding.

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

Print Name \_\_\_\_\_



# Stay & Play Dog Hotel & Daycare

## Authorization for Emergency Medical Treatment

The undersigned Owner, of the animal named \_\_\_\_\_ hereby authorizes a licensed veterinarian, and whoever may be designated as assistants, to administer such treatments and to perform such procedures as are considered therapeutically or diagnostically necessary for the care of my animal, including the administration of anesthesia. In the event that emergency treatment is required,

I authorize the veterinary staff and their assistants to perform medical and surgical treatments necessary to preserve the life of the patient until I can be contacted for further authorization.

I understand that no guarantee of successful treatment is made. I accept financial responsibility for the treatment of the above named patient, and I understand that payment in full is due upon release of the patient from the veterinary hospital, or when service is otherwise terminated

I understand that I am entitled to a written estimate of charges at my request.

Veterinary service is provided during nighttime hours as necessary in the judgment of the veterinarian in charge. Continuous presence of qualified personnel may not be provided.

I certify that I have read and understand the terms and conditions stated in this agreement, and acknowledge that this agreement shall be effective and binding upon the parties. I hereby release Stay & Play and all staff from any and all claims arising out of such an emergency situation.

PET PARENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

PRINT NAME \_\_\_\_\_

## Medical Information Release

I hereby certify that I am the owner (Pet Parent) or authorized agent of the Pet Parent of the above-described pet(s). Further, I hereby request and authorize this veterinarian to release the requested medical information for: \_\_\_\_\_ to Stay and Play.

I release the veterinarian and staff from any legal responsibility or liability for the release of information to the extent indicated as authorized herein.

PET PARENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

PRINT NAME \_\_\_\_\_