

CANINE COMFORT DOG DAYCARE & BOARDING

Pet's name: _____.

Owner's name: _____.

Home address: _____.

E-mail: _____.

Home phone: _____.

Cell phone: _____.

Work phone: _____.

Pet's age and birth date: _____.

Breed and sex (pet must be neutered or spayed) _____ M F.

Vaccination expiration dates (provide a copy):

DHPP: _____.

Bordetella: _____.

Rabies: _____.

Canine Influenza(optional) _____.

Flea program: _____ Date de-wormed _____.

Veterinarian name and phone# _____.

In the event your pet bites or injures another pet or person, or in the event you or your dog is injured while at Canine Comfort, you agree to assume all legal and financial responsibilities, and to defend, indemnify, and hold harmless Canine Comfort and its employees from and against any and all claims, liabilities, losses, demands, and court costs (including reasonable attorneys' fees) arising from any property damage or injury to or death of any dogs or persons occurring at or arising out of our services at Canine Comfort. On behalf of myself and any and all other owners of this pet, I agree to these terms.

Sign: _____ Date: _____

Should I not be able to be contacted;

I, _____, give consent to
Elba Ramirez Velez of Canine Comfort, to seek veterinary attention for my dog

_____, if in her opinion it is deemed necessary.

All costs of said veterinary care shall be paid by me upon my return.

Sign _____

Date _____

I _____ being the owner of

_____ give consent to
Canine Comfort and their employees to use publicly,
photos and videos taken of my dog(s).

Sign _____

Date _____

I _____ confirm that I have
reviewed and understand the Canine Comfort Policy Document and realize it will be
regularly updated.

Sign _____

Date _____