

The Animals' House



Boarding, Daycare & Boot-camp Registration/Agreement

OWNER INFORMATION:

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ E-Mail Address: _____

I would like to receive email updates on upcoming events/classes YES/NO

Emergency Contact & Phone Number _____

PET INFORMATION:

Name: _____ Breed: _____

Color: _____ DOB: _____

Sex: Female/Spayed Male/Neutered Approx Weight: _____

***Please note that all dogs over the age of 6 months are required to be spayed or neutered.**

Required Vaccine Information (Date Given):

Rabies: _____ Distemper: _____

Bordetella (required every 6 months): _____

Name of Veterinarian: _____

Phone Number of Veterinarian: _____

How did you hear about us?

Please describe your dog's temperament: _____

Has your dog ever bitten a human or another dog: Yes No

If yes, please explain _____

Has your dog ever shown aggressive behavior towards a human or another dog:

Yes No

If yes, please explain _____

Is your dog a jumper, climber, escape artist: Yes No

If yes, please explain: _____

Is your dog crate trained/comfortable sleeping in a crate: Yes No:

If no, please explain: _____

Please describe any medical/physical problems (including seizures and allergies)

What medications is your dog currently taking (if any):

What is your dog's normal feeding schedule (including amount per meal)?:

TRAINING INFORMATION:

Have you or your dog ever been through formal training? _____

If yes, when and where? _____

What commands does your dog already know?

Command

Behavior Expected

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

What type of collar do you use on your dog? _____

On what side does your dog normally walk? _____

Please describe the behavioral issues, if any, your dog has been having:

Please describe the behaviors you would like your dog to learn during dayschool training:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

****Please Read****

The Animals House Policies/Owner Consent:

- 1) Owner understands the risks involved with communal play and boarding of dogs. Our boarding and daycare dogs play in indoor pens. Although we will offer reasonable care, the unpredictable personality and behavior of dogs can sometimes lead to injury and/or spread of such illnesses as Kennel Cough.
- 2) Owner understands that full payment is required at the time of animal pick up. The Animal's House accepts cash, check (with proper ID), Visa, Mastercard and American Express. We do not extend credit and the owner is responsible for all fees for products and services rendered. Owner also understands that if the balance is not paid in a timely fashion they are responsible not only for the balance due but any collection and/or attorney fees that are incurred in the attempt to collect this debt.
- 3) Owner understands that in the event of a medical emergency an attempt to contact them will be made immediately. Then their dog will be taken to either Animal Medical Center of the Cascades, Leesburg Animal Emergency Hospital or Emergency Veterinary Clinic of Northern Virginia. Owner entrusts the staff of The Animal's House to determine if the condition of their pet should be considered a medical emergency. Owner agrees to pay any of the veterinary hospitals listed above directly at the time of treatment for any service rendered.
- 4) The Animal's House cannot guarantee that toys, blankets or beds will be returned in the same conditions brought in.
- 5) Owner understands that the business hours are Monday through Friday from 6am to 7pm, Saturday from 8am to 6pm and Sunday from 8am to 9am and 4pm to 6pm. Staff members are present starting at 5:30am weekdays and 5:30am on weekends and leave at the close of business.

- 6) All dogs are required to have the following up to date vaccinations: DISTEMPER, RABIES, BORDATELLA (Kennel Cough), which is required every six months. Owner understands that he/she must provide written proof of the above vaccine history from their veterinarian's office. If the dogs' vaccines are not current or cannot be verified, owner authorizes either The Animals Medical Center of the Cascades to update them at owner's expense. Owner also understands that the BORDATELLA vaccine must be given one week prior to entering The Animal's House.

- 7) If any signs of fleas and/or ticks (including flea dirt) are seen on owner's dog anytime during their visit, the owner will be contacted immediately. If the owner is not available, immediate treatment will be given at the owner's expense.

- 8) **Reservations:** Reservations are required for all daycare, and overnight boarding stays.
Daycare: If your dog will not be attending daycare on their scheduled day, you need to cancel your appointment by 7 pm the day before your scheduled day. Failure to notify us will result in a \$35 "no show" charge.
- 9) Overnight Boarding: A credit card number is required to hold all boarding reservations. If you need to cancel an overnight boarding reservation, you must do so 36 or more hours in advance of your stay. Failure to notify us will result in a \$50 "no show" charge.
This policy is to insure that dogs on the waiting list get to join us when space allows.

Owner Signature: _____
 Print Name: _____
 Date: _____

FOR TRAINING SERVICES:

- 1) Owner understands that dog will be involved in daily training sessions that may take place on or off the daycare facility premises.
- 2) Owner understands that to ensure the success of the training, they must continue to reinforce and practice the commands that were taught.
- 3) Owner understands that included in the one or two week day-school package is a free group class, or one private lesson.

Training Waiver

I, the undersigned, hereby acknowledge that I, my attending family members/guests, and my dog are voluntarily participating in Dog Training with The Animals' House. I understand that my attendance of The Animals' House dog training session(s) is not

without risk to myself, my dog(s), any attending guests, family members and my personal property. I, and attending family members/guests, individual, and on behalf of their respective heirs, assigns or successors, hereby expressly waives, releases and discharges of The Animals' House and its employees from and claims, demands, injuries, damages or causes of action that are in any way related to participation in the training. I am willing to accept assumption of the risk of participation in training and the risk of illness, bodily injury, death, or property damage while under the supervision of The Animals' House in my own home or a public space. I acknowledge that I will follow the instructions of The Animals' House instructor and abide by all rules established by those classes or events I attend. I hereby agree to secure a proper collar and leash as directed by The Animals' House and its trainers and to wear proper clothing and shoes to permit effective training of my dog. I agree to keep my dog(s) on leash and under control at all times except when off leash activity is permitted by the instructor. Failure to follow the rules of The Animals' House or its instructors may result in excusal from any class or event without refund. I pledge to abide by the statements in this waiver and will insure the same of my companions. I understand that the degree to which a dog is successfully trained is a function of the interest, commitment, and cooperation of the owner/handler. The Animals' House training makes no representations, guarantees, promises, implied or expressed, that any training received from The Animals' House will 'cure' a dog of any unwanted/dangerous propensities. I acknowledge and agree that there is no guarantee of what my dog will achieve in training based on the instruction given, but that I as the owner/handler of my dog(s) am responsible for teaching and training my dog(s). I expressly agree that the foregoing release and waiver, and assumption of risk are intended to be as expansive, broad and inclusive as permitted by Virginia law. I agree to provide proof of vaccinations as requested and understand my dog will not be admitted to class and/or a private session will not occur without such proof. I understand that public relations are an important part of advertisement at The Animals' House and I will allow The Animals' House to use any photographs taken of me for public relations activities. I understand that printing my name on the line below means I agree to all of the terms of this document and that the information I have provided is true and correct.

Owner Signature: _____
Print Name: _____
Date: _____