



Boarding Service Agreement

Office: 360-526-0093

Email: poochpalacefriends@yahoo.com

Web: www.pooch-palace.biz

This agreement is effective starting (Date): _____ and is between Pooch Palace, Inc. and

(Name) _____ (hereinafter referred to as "client") who resides at

(Address) _____.

Phone Number: _____ Cell Number: _____ Other Number: _____

Who can we call in the event of an emergency?: _____

This agreement constitutes permission to board said animal and perform duties as stated in the relevant Pet Information Sheet. Any changes to this agreement must be done so in writing or they will be null and void. Pooch Palace, Inc. has the right to make any changes to this agreement at will and without notice. With any changes, a new agreement will be presented before any new services are rendered.

Type of Animal Boarding:

Dog Cat Bird Other: _____

Rate: \$ _____ per day Additional Pet: \$ _____

Payment for Services:

Cash Check Credit Card

Card Type: Visa MC Discover

Card #: _____ - _____ - _____ Exp. Date: _____

Signature: _____ Date: _____

**In the event of a returned check, the client must pay the entire invoice and a \$30 fee promptly via cash or money order only.*

Any medical/health concerns (Must fill out Medication Permission slip if administering meds): _____

Additional information/comments: _____

Policies and Procedures

- 1) Pooch Palace, and its employees agree to provide services stated in this agreement in a reliable and trustworthy manner. In consideration of these services and as an express condition thereof, the client expressly waives any and all claims against Pooch Palace, or its employees, unless arising from gross negligence on the part of Pooch Palace.
- 2) The client understands that all pets must have a veterinarian and must be current with all vaccinations. Vaccinations must be given far enough in advance to be effective. We require about 2 weeks. We also require vaccination against kennel cough, which is very common among boarding facilities. Please bring vaccination record with you before or during admission or pet(s) will not be admitted.
- 3) The client understands that all pets must be treated with a flea, tick and heartworm preventative. If fleas are found on pet, a flea bath will be given at owner's expense.
- 4) Pets over 6 months of age must be spayed or neutered.
- 5) The client understands that we will not administer sedatives to your pet – regardless if they are veterinarian prescribed. If your pet needs this type of medication you need to make arrangements for your pet to be hospitalized with your veterinarian.
- 6) Pooch Palace does not diagnose, prognose, nor make therapy decisions nor does it offer veterinary services. Any veterinary/medical concerns will be referred to a veterinarian.
- 7) Pooch Palace will not board acutely ill animals or those with uncontrolled medical conditions. We suggest the pet be boarded with a vet. Certain medical conditions may also be referred to a veterinarian for boarding. Pets infected with Feline Aids, FIP, ringworm or any other contagious disease will not be admitted.
- 8) The client understands that the animals interact with other animals and employees. The client must express any known aggression problems that the animal has with other pets or people and must be free of any communicable diseases. The pet is being admitted based on client's representation.
- 9) Client is solely responsible for any harm caused by their pet to any employees, other pets/owners, or property. Client agrees to reimburse Pooch Palace for all costs (including, but not limited to, medical care and lost wages) associated with exposure to pet(s).
- 10) Pooch Palace does provide food-bowls, and bedding; however, we recommend you provide your own pet food, as a change in diet can cause upset stomachs. Please label all items including medications with pet's name and owner's name.
- 11) Pooch Palace does accept aggressive animals; however, these animals will not have any interaction with others. If you request a play group setting and your pet displays aggression or behavioral problems, it will be removed from playgroup.
- 12) Client understands if a playgroup setting is requested for your pet that accidents do happen. Client understands Pooch Palace will not be responsible for scrapes, scratches, playful bites, transmission of diseases, including bordatella, etc. as these things are common amongst play groups.
- 13) If your dog is a digger, climber, or escape artist of any kind, it must be disclosed to Pooch Palace at time of arrival. The client has the right to tour our facility at any time. If client feels their dog may be able to escape it must be disclosed at this time.
- 14) Pooch Palace reserves the right to take pet(s) to vet if necessary. Client is responsible for all charges including, but not limited to, vet fees and transportation fees.
- 15) Pooch Palace reserves the right to deny service or terminate service because of safety concerns, financial concerns, or inappropriate or uncomfortable situations.
- 16) The client agrees if pet is not picked up, or we are not notified, within 5 days after scheduled pick up date, Pooch Palace will consider pet abandoned and pet will be dropped off at nearest shelter.
- 17) Holiday Cancellations must be received 2 days prior to the scheduled boarding day or a \$25 cancellation fee will apply. There will be a \$5 fee for late pick-ups. If pet is not picked up by one hour after close it will remain for another night and will be billed for another boarding day. Payment for services rendered is due at pick up.

By signing below the client fully understands and agrees to the contents of this agreement:

Client's signature: _____ Date: _____



Veterinarian Release

Office: 360-526-0093

Email: poochpalacefriends@yahoo.com

Web: www.pooch-palace.biz

Pet Information

Type of Animal: _____

Animal's Name: _____

Age: _____

Medical conditions: _____

Veterinarian Information

Veterinarian: _____

Address: _____

Phone: _____

***During my absence, Pooch Palace, Inc. will be caring for my pet(s). In the event of an emergency, I authorize you (veterinarian) to administer medical treatment and will be responsible for payment to you (veterinarian) upon my return.**

I, _____, give Pooch Palace, Inc. permission to transport my pet(s) to the above veterinarian in the event of an emergency or sickness and receive any information pertaining to my pets in regards to their condition. I also give permission to release the results to Pooch Palace, Inc..

If the above veterinarian is not available, I authorize Pooch Palace, Inc. to transport my pet(s) to a veterinarian of choice and authorize treatment. If emergency care is needed after regular office hours, my pet(s) may be taken to the nearest Veterinarian Emergency Clinic/Hospital.

I give permission to provide treatment up to \$ _____ and I will be responsible for all charges upon my return including, but not limited to, vet fees, extra visit fees and transportation fees.

I agree that Pooch Palace, Inc. is released from all liability related to transportation to and from veterinarian and treatment for sickness or emergency.

I agree to authorize veterinarian to euthanize my pet in **extreme** circumstances after all reasonable attempts have been made to reach me or my emergency contact.

This agreement will remain valid for all visits unless a new one is signed.

Client's Signature: _____ Date: _____