

**Dog Owner's Liability Release Form**

This agreement is between Pleasant Pooch, LLC, it's owners Kristin N. Higgs and our affiliates, and our guests (called Owner) \_\_\_\_\_.

Owner is releasing \_\_\_\_ (quantity) dog(s)

Named: \_\_\_\_\_ (called Dog).

Breed(s): \_\_\_\_\_ Approximate Weight: \_\_\_\_\_

**Section I: Owner**

**1. Risk of Loss:** Owner hereby assumes and shall bear all risk of loss, injury, illness, disease and damage of any kind or nature to the Dog while in the possession of Pleasant Pooch, LLC, or any other third party and shall hold Pleasant Pooch and its owners harmless for such claims.

**2. Indemnity:** Owner hereby assumes and shall bear all risk of loss, injury, illness, disease and damage of any kind or nature to any person, animal or property of Owner, Pleasant Pooch, LLC, or others caused by the Dog, the actions or inactions animals and agrees to indemnify and defend Pleasant Pooch, LLC, and hold Pleasant Pooch, LLC, harmless for such claims.

**3. Health Status:** Owner represents and warrants that the Dog is healthy, in good condition and has not been exposed to any infectious or contagious disease. Owner agrees to immediately notify Pleasant Pooch of any change in the Dog's health or condition or of any illness, injury, or exposure to an infectious or contagious disease. Owner represents and warrants that the Dog has been given a recent Rabies vaccination and all other relevant shots/vaccinations. Upon request of Pleasant Pooch, Owner shall provide proof of such test and the results. Further, upon request, Owner shall provide a current health certificate and proof of ownership of Dog.

**4. Emergency:** Pleasant Pooch reserves the right to provide or secure emergency services for the Dog(s) named above, if, at Kristin N. Mill's discretion, the Dog is in serious need of such services and Owner cannot be reached at the emergency contact number. Kristin N. Mills has permission to secure such care as is necessary to protect health and welfare of the Dog. Owner agrees that if immediate or emergency care is directed by Owner or provided as per this paragraph, Owner shall be solely responsible for the costs of all such care.

**Section II: General Terms**

**1.Services:** Additional services including food and other care available through Pleasant Pooch, LLC, upon request at extra costs, to be agreed to by the parties in advance of such requested services. Please note the cost of boarding is \$36.00 a day. That starts from the time of drop off and starts over at 10:00 AM the next day.

**2. Governing Law:** This Agreement shall be governed by and construed in accordance with the laws of the State of Oklahoma. The parties agree that any disagreement shall only be mitigated by the laws and through the State of Oklahoma.

**3. Entire Agreement; Amendment; Binding Effect:** This instrument contains the entire agreement of the parties and all the covenants and agreements between the parties concerning same. Unless otherwise specifically provided herein, this Agreement may not be changed except by written agreement duly executed by the parties hereto. This Agreement shall inure to the benefit of and be binding upon the parties hereto and their respective successors, heirs, affiliates and personal representatives.

Dog Owner \_\_\_\_\_

Dated \_\_\_\_\_

Pleasant Pooch, LLC (Kristin N. Higgs) \_\_\_\_\_

Dated \_\_\_\_\_

# Pleasant Pooch Boarding Guidelines

All boarders are required to bring enough food for the length of their stay. We do this to protect them from getting upset stomachs from a change in diet. Please do not send anything with your dog that you do not want damaged or destroyed. We make every effort to prevent destruction or loss of toys and beds, but dogs will be dogs, and we cannot always predict how a dog will act in a new environment.

**YOU MUST TURN IN THE BOARDING APPLICATION AND LIABILITY RELEASE BEFORE YOUR RESERVATION CAN BE SAVED.**

**Board and Trains MUST pay 50% of training fee at time of drop off.**

**The board and train packages are as follows: (Please check one)**

- Board and Train Puppy..... **\$795.00**
- Board and Train 8 Day..... **\$695.00**
- Board and Train 8 Day (2<sup>nd</sup> dog – same family) ..... **\$575.00**
- Board and Train 15 Day..... **\$1,200.00**
- Day School – 5 days of daycare ..... **\$425.00**

**Please initial next to each line below.**

\_\_\_\_\_ Any dog/dogs not picked up *before* 10:00 on Monday-Sunday are then charged a \$28 daycare fee.

\_\_\_\_\_ Payment for boarding is always due at time of pick up. We accept all major credit cards, cash, and checks.

\_\_\_\_\_ You must bring your own food. If you do not have food upon arrival you will be charged \$2.00 per meal here at Pleasant Pooch. You risk your dog getting an upset stomach if not providing your own dog food.

\_\_\_\_\_ Board and Trains must pay 50% of training fee at time of drop off

\_\_\_\_\_ What to Expect: Dogs may seem anxious at drop off; dogs play hard here and are much more stimulated than they would be at home, they do not spend as much time asleep, so when they get home, they are usually tired at for a couple days, much like when we humans get back from a fun vacation; dogs may eat less while they are here due to anxiety they may have (this usually goes away after a day or two) and may shred their beds from anxiety or out of spite.

\_\_\_\_\_ Discounted boarding packages must be purchased by the time you drop off your dog. Otherwise, you will be charged the regular boarding rate. These packages can be split between multiple boarding reservations.

\_\_\_\_\_ There is a \$35 cancellation fee for any reservations cancelled within 72 hours of drop off date

## **BOARDING & DAYCAMP APPLICATION**

I, \_\_\_\_\_, understand all the terms and charges for boarding and  
daycamp rates and rules that are listed above.

Applicant Signature \_\_\_\_\_

**Drop-off Date & Estimated Time:** \_\_\_\_\_

**Pick-up Date & Estimated Time:** \_\_\_\_\_

### **OWNER INFORMATION**

Name:

Address:

City and State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

E-mail Address:

### **PAYMENT INFORMATION**

*(A credit card is required to hold your reservation. If reservation is canceled within 72 hours of the start date, you will be charged a cancellation fee of \$35.00 per pet.)*

Name on Card:

Card Type:

Credit Card #

Expiration date:

### **EMERGENCY CONTACT INFORMATION**

*(Please list someone besides yourself & someone not traveling with you)*

Name:

Relation to Owner:

Home Phone:

Cell Phone:

Who besides yourself is authorized to pick-up your dog(s)?

1. Name:

Phone:

Relation to Owner:

2. Name:

Phone:

Relation to Owner:

**PET INFORMATION DOG #1**

Name: Sex (check one):  FEMALE  MALE

Reproductive Status (check one):  Spayed  Neutered  Unaltered

Breed: Weight:

Birthday (MM/DD/YYYY) or Approximate Age:

Colors/Markings:

How often do you feed your dog? (check one)  1x  2x  3x

Amount per Feeding: Brand of Food:

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

How does your dog behave around children?

How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC?  NO  YES

Does your dog get along with the other resident animals?  NO  YES

*Explain:*

Has your dog shared food, water, or toys with other animals?  NO  YES

Has your dog ever socialized off-leash with other dogs?  NO  YES

Is your dog crate trained?  NO  YES

Has your dog ever bitten a person?  NO  YES

*Explain:*

How does your dog act when meeting new people?

**Please check all that apply for your dog:**

Aggressive  If checked, explain:

Blind

Poop Eater

Deaf

Digger

Excessive Barking  If checked, explain:

Excessive Marking

Excessive Mounting

Food Aggressive  If checked, explain:

Food Allergy  If checked, explain:

Jumper 4' Fences

Jumper 6' Fences

Separation Anxiety

Toy Possessive

**MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?  **NO**  **YES**

Medication & Directions:

Do they have any allergies or special needs? *If yes, please list below*

Does your dog have any past or current injuries or disabilities?  **NO**  **YES**

*Explain:*

Does your dog have any sensitive areas on their body?  **NO**  **YES**

*Explain:*

## **ADDITIONAL INFORMATION**

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before?  NO  YES

*If so, where at:*

Has your dog ever been boarded before?  NO  YES

*If so, where at:*

**Is there anything else we need to know about your dog?**

## **TRAINING INFORMATION**

Has your dog ever been in training before?  NO  YES

*If yes, where at:*

If they were in a training class, how did they behave and what did they learn?

How does your dog behave on a leash?

Please list any behavior issues:

What are your goals for the board and train?

Is there anything specific you want the trainer to focus on?

**PET INFORMATION DOG #2**

Name: Sex (check one):  FEMALE  MALE

Reproductive Status (check one):  Spayed  Neutered  Unaltered

Breed: Weight:

Birthday (MM/DD/YYYY) or Approximate Age:

Colors/Markings:

How often do you feed your dog? (check one)  1x  2x  3x

Amount per Feeding: Brand of Food:

How many people are in your household?

Adults: \_\_\_\_\_ Male \_\_\_\_\_ Female

Children: \_\_\_\_\_ Male \_\_\_\_\_ Female

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How long have you owned your dog?

Where did you get your dog?

Can your dog have treats while at Pleasant Pooch LLC?  NO  YES

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*Explain:*

Has your dog shared food, water, or toys with other animals?  NO  YES

Has your dog ever socialized off-leash with other dogs?  NO  YES

Is your dog crate trained?  NO  YES

Has your dog ever bitten a person?  NO  YES

*Explain:*

How does your dog act when meeting new people?



**Please check all that apply for your dog:**

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Poop Eater

Deaf

Digger

Excessive Barking  If checked, explain:

Excessive Marking

Excessive Mounting

Food Aggressive  If checked, explain:

Food Allergy  If checked, explain:

Jumper 4' Fences

Jumper 6' Fences

Separation Anxiety

Toy Possessive

**MEDICAL INFORMATION**

Clinic Name:

Veterinarian:

City, State:

Phone:

Microchip #:

Rabies Tag #:

Any other identification method used (such as tags, tattoos?)

Does your dog take any medications?  **NO**  **YES**

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*Explain:*

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