

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. The 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. Mills 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 the 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. Mills) _____
Dated _____

Pleasant Pooch Boarding Guidelines

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

Please initial next to each line below.

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

_____ A 50% deposit is due at the time of booking to make any reservations of two nights or more. The remaining 50% is due at pickup plus the daycamp fee if picking up in the afternoon.

_____ Cancellation Policy: Any boarding canceled two weeks prior to the start of the stay will be refunded the entire boarding deposit. Cancellations made after this cutoff, but still 48 hours prior to the start of the stay will have their deposit credited to their account to use for a future stay. If you cancel 48 hours or less before the start of the stay the deposit is nonrefundable and can no longer be applied to future stays.

_____ Please bring your own pre-portioned dog food. If you do not have food upon arrival or run out during your stay you will be charged \$2.00 per meal here at Pleasant Pooch. It is possible for dogs to get upset stomachs from switching food suddenly. Please pack enough for your whole stay.

_____ Discounted boarding packages must be purchased prior to drop-off. Otherwise, you will be charged the regular boarding rate. These packages can be split between multiple boarding reservations. You must still pay the daycamp fee if picking up in the afternoons, even when using a boarding package.

_____ We have beds, blankets, toys, and bowls here for your dog to use during their stay. If you do end up bringing items from home Pleasant Pooch is not responsible for any lost or damaged items.

_____ Please bring all food in individual bags per meal. If you do not bag the food, you are subject to a \$10 fee because we will have to portion and bag the food here.

_____ If your dog has any medications, please bring them in the original pill bottle and inform us at drop off.

_____ Please make sure all dogs are on a leash before entering our lobby.

BOARDING & DAYCAMP APPLICATION

Drop off/Pick up hours:

Mon-Fri: 7AM-10AM & 3PM-6PM & Sat-Sun: 8AM-10AM & 4PM-6PM

OWNER INFORMATION

Owner Name:

Additional Owner:

Address:

City and State:

Zip Code:

Owner Cell Phone:

Additional Owner Cell Phone:

Owner E-mail Address:

Additional Owner E-mail Address:

PAYMENT INFORMATION

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

Dog Name:

Sex:

Reproductive Status (circle one): Spayed/Neutered or Unaltered

Breed:

Weight:

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

Colors/Markings:

Please check all that apply for your dog:

Dog Aggressive

If checked, explain:

Human 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

Has your dog ever bitten a person? YES NO

If answered yes above, please explain:

How does your dog act when meeting new people?

PET INFORMATION: Dog #1 Cont.

How often do you feed your dog? (circle all that apply) AM NOON PM

Amount per Feeding:

Brand of Food:

How long have you owned your dog?

Where did you get your dog?

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

MEDICAL INFORMATION

Clinic Name:

Veterinarian:

Address:

City, State:

Phone:

Please list any medications & directions that your dog currently takes:

Do they have any allergies or special needs?

If answered yes above, please explain:

Does your dog have any past or current injuries, disabilities, or sensitive areas on their body? YES NO

Explain:

ADDITIONAL INFORMATION: Dog #1 Cont.

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before? YES NO

If so, where at:

Has your dog ever been boarded before? YES NO

If so, where at:

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

PET INFORMATION: Dog #2

Dog Name:

Sex:

Reproductive Status (circle one): Spayed/Neutered or Unaltered

Breed:

Weight:

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

Colors/Markings:

Please check all that apply for your dog:

Dog Aggressive

If checked, explain:

Human 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

Has your dog ever bitten a person? YES NO

If answered yes above, please explain:

How does your dog act when meeting new people?

PET INFORMATION: Dog #2 Cont.

How often do you feed your dog? (circle all that apply) AM NOON PM

Amount per Feeding:

Brand of Food:

How long have you owned your dog?

Where did you get your dog?

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

MEDICAL INFORMATION

Clinic Name:

Veterinarian:

Address:

City, State:

Phone:

Please list any medications & directions that your dog currently takes:

Do they have any allergies or special needs?

If answered yes above, please explain:

Does your dog have any past or current injuries, disabilities, or sensitive areas on their body? YES NO

Explain:

ADDITIONAL INFORMATION: Dog #2 Cont.

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before? YES NO

If so, where at:

Has your dog ever been boarded before? YES NO

If so, where at:

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

PET INFORMATION: Dog #3

Dog Name:

Sex:

Reproductive Status (circle one): Spayed/Neutered or Unaltered

Breed:

Weight:

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

Colors/Markings:

Please check all that apply for your dog:

Dog Aggressive

If checked, explain:

Human 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

Has your dog ever bitten a person? YES NO

If answered yes above, please explain:

How does your dog act when meeting new people?

PET INFORMATION: Dog #3 Cont.

How often do you feed your dog? (circle all that apply) AM NOON PM

Amount per Feeding:

Brand of Food:

How long have you owned your dog?

Where did you get your dog?

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

MEDICAL INFORMATION

Clinic Name:

Veterinarian:

Address:

City, State:

Phone:

Please list any medications & directions that your dog currently takes:

Do they have any allergies or special needs?

If answered yes above, please explain:

Does your dog have any past or current injuries, disabilities, or sensitive areas on their body? YES NO

Explain:

ADDITIONAL INFORMATION: Dog #3 Cont.

How did you hear about Pleasant Pooch LLC?

Has your dog ever been in daycare before? YES NO

If so, where at:

Has your dog ever been boarded before? YES NO

If so, where at:

If boarding multiple dogs would you like them to :

- Stay together in the same suite
- Sleep in the same suite together, but eat separately
- Stay in separate suites inside, but go outside together
- Keep them separate all together
- Other: _____

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