



boarding — grooming — daycare  
for dogs and cats.

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**PET PROFILE****Date:****Your Name: (Last)****(First)****Email:****Phone Numbers: Home ( )****Mom's cell ( )****Dad's cell ( )****Address: (please include billing and shipping address if different)****Persons authorized to pick up your pet:****Emergency Contact and Phone number:****Veterinarian's Name, Address and Phone Number:****Pet's Name:****Sex: M / F****Neutered/Spayed****Breed:****Coloring/Markings:****Weight:****Pet's Birthday: / /****How long has your pet lived with you?**

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**DIET/FEEDING INSTRUCTIONS****Will you supply your pet's food? Yes / No****How many times per day should we feed your pet?****When?****How much?****Please check those that apply**

- Dry food and canned food mixed together
- Dry food and canned food fed in separate dishes
- Water in dry food
- Pet tends to eat food immediately and completely
- Pet tends to eat food over course of time
- Pet is fussy eater

- Dry food only
- Canned food only

**Any dietary constraints? Yes / No If yes, please explain.****Do you feed your pet treats? Yes / No****If yes, will you supply treats? Yes / No****If you do not supply treats, we give treats at bedtime. Is it acceptable for us to give your pet a treat at bedtime?  
Yes/No**

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**MEDICAL INFORMATION**

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What is your pet's current health condition?  
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Any restrictions that should be placed on your pet's movement or activities?  
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Does your pet currently take any medications? Yes / No If yes, please describe what the medication is for, how often it is given and any other instructions such as how it is administered and stored.  
\_\_\_\_\_

What is the source of the medication? Drugstore / Veterinarian  
\_\_\_\_\_

Do you currently give your pet a monthly preventative for heartworm/other parasites/fleas & ticks such as Heartgard Plus, Sentinel, Frontline, etc.? If yes, please list the preventative.  
\_\_\_\_\_

\_\_\_\_\_  
*If no, for the protection of all our guests, if deemed necessary, your pet may be treated for parasites .*

When was your pet's last veterinary visit?  
\_\_\_\_\_

Was your pet adopted from a shelter within the last 6 weeks?  
\_\_\_\_\_

Any other health concerns we should be aware of?  
\_\_\_\_\_

Does your pet have a chip? Y/N If yes, please list chip number  
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**BEHAVIOR**

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Does your pet have any behavioral idiosyncracies we should be aware of? i.e. likes to sleep with blanket or toy, startled easily, repetitive behavior, etc.  
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Has your pet been in daycare/boarding before? Yes / No If yes, how did your pet behave?  
\_\_\_\_\_  
\_\_\_\_\_

Has your pet been to a dog park? Yes / No If yes, how did your pet behave?  
\_\_\_\_\_

Was your pet adopted? Yes / No If yes, do you have any knowledge of your pet's behavioral history? Please describe  
\_\_\_\_\_

Has your pet had any obedience training? Yes / No If yes, please describe  
\_\_\_\_\_  
\_\_\_\_\_

Circle all that describe your pet's personality: outgoing / verbally sensitive / timid / affectionate / pushy / independent / reserved / confident / submissive / clingy / excitable / gentle / playful / mouthy. Other:  
\_\_\_\_\_

Is your pet's activity level: low / medium / high  
\_\_\_\_\_

Please circle all situations where your pet may become unfriendly: grabbing collar / hugging / removing from furniture / touching while sleeping / touching ears/paws/mouth/tail / playing around other pets. Other:  
\_\_\_\_\_

Describe your pet's unfriendly behavior (circle all that apply): will bite / may bite / growls / snaps / shows teeth / trembles / moves away / Other:  
\_\_\_\_\_

Has your pet ever bitten a person? Yes / No If yes, please describe  
\_\_\_\_\_  
\_\_\_\_\_

Has your pet ever bitten another pet? Yes / No If yes, please describe  
\_\_\_\_\_  
\_\_\_\_\_

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**TERMS AND CONDITIONS / SERVICE AGREEMENT**

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- I specifically represent that I am the sole owner of my pet and I agree to pay the rate for pet care provided in effect on the date pet is checked into A&B Kennel Club. I agree that all charges due are paid at the time services are rendered. My pet shall not leave A&B Kennel Club until all charges due are paid by me or proper arrangements for payment, at the sole discretion of A&B Kennel Club, are agreed to by me and A&B Kennel Club.
- I understand that I am solely responsible for any harm or damage caused by my pet while my pet is at A&B Kennel Club and I hereby Indemnify and hold harmless A&B Kennel Club from any and all liability.
- I understand and agree that A&B Kennel Club is relying on my representation of my pet's health and behavior including, but not limited to, showing aggression or threatening behavior toward any other person or pet, that my pet is in good health and has not harmed or shown aggression or threatening behavior toward any person or pet. I further understand and agree that A&B Kennel Club and it's staff and volunteers are not responsible or liable for any problems that may develop.
- I understand and agree that A&B Kennel Club will not be held responsible for injuries to my pet arising from my pet's attendance and participation at A&B Kennel Club daycare, boarding or grooming and I release them from any liability whatsoever.
- Although A&B Kennel Club watches all pets carefully and DOES NOT allow aggressive pets, A&B Kennel Club relies on information provided by owners and daycare can be hazardous due to multiple dogs playing together. A&B Kennel Club cannot be responsible for injuries occurring while pets are playing. A&B Kennel Club reserves the right to deny admittance to your pet for any reason at any time.
- I understand and agree that any medical emergencies that develop with my pet will be treated as deemed best by A&B Kennel Club staff and volunteers, at their sole discretion, and that I will assume full financial responsibility for any and all expenses involved.
- I understand and agree that if I fail to provide proof of current vaccinations or my pet's vaccinations are found to be expired, or otherwise incomplete, A&B Kennel Club has the right to refuse service until current proof is provided. I specifically represent to A&B Kennel Club that, to my knowledge, my pet has not been exposed to any contagious diseases within a 30-day period prior to check-in. I also agree to notify A&B Kennel Club of any known exposure of my pet to a communicable disease and understand pets who have been ill with a communicable disease in the last 30 days will require veterinary certification of health to be admitted or re-admitted.
- A&B Kennel Club will administer oral medications and/or food supplements as instructed, provided I make a clear request and provide proper direction for administration and storage. All medications provided by owner will be in original packaging and administered per label. I acknowledge that A&B may administer parasite treatment if I am not currently giving my pet a monthly preventative.
- Any controversy or claim arising out of or relating to this agreement, or the breach thereof, or as the result of any claim or controversy involving the alleged negligence by any party to this agreement, shall be settled in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by an arbitrator may be entered in any Court having jurisdiction thereof. The arbitrator shall, as part of the award, determine an award to the prevailing party of the costs of such arbitration and reasonable attorney's fees of the prevailing party.
- By signing this form, I acknowledge that I understand and accept the terms and conditions set forth by this agreement. All terms and conditions of this agreement shall be binding on the heirs, administrators, personal representatives and assigns of me and A&B Kennel Club.

**Name of Owner:** \_\_\_\_\_

**Signature of Owner:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Pet's Name** \_\_\_\_\_

**A copy of my pet's most recent vaccination record is attached.**

**Revised 072208**