

## The Dog Hut Application

Date:

Owner's Name(s):

Address:

Email:

Cell Phone#:

Work Phone #:

Home Phone #:

The following person(s) may pick up my dog(s) up from The Dog Hut without specific permission:

Referred By:

(We offer a free day of daycare to the person who referred you.)

### **Emergencies**

Emergency Contact if unable to reach owner:

Emergency Contact Phone #(s):

Veterinarian Name:

Veterinarian Phone #:

### **Dog Information:**

Dog(s) Name:

Gender:

Breed:

Birthday/Age:

Color:

Spayed/Neutered: Y /N

Are there any medical issues we need to be aware of?

Vaccinations:

- Rabies Due
- DHLPP Due:
- Bordatella Due:
- Yearly Heartworm Test:
- Flea And Tick Medication:

**Important Questions:**

- Has your dog ever attended daycare and if yes, did he/she like it?
- Describe how your dog plays with other dogs? (i.e. Plays rough or gentle, chases, barks at other dogs, wrestles, shy, growls or snaps)
- Has your dog ever shown food or toy aggression?
- Are there any breeds or types of dogs your dog dislikes or fears?
- Is your dog crate trained?
- What commands does your dog respond to?
- Has your dog ever jumped a fence? If yes, what height?
- Is there anything else we should know about your dog's behavior?

# **The Dog Hut Daycare Agreement**

## **Daycare Service**

The Dog Hut agrees to exercise due diligence and reasonable care and to keep the premises sanitary and properly enclosed. Our services include giving your dog medication as indicated on the Medicine Form. Our hours of operation are from 6:30am – 6:00pm Monday through Friday and we will keep your dog for any amount of hours during this eleven hour period per day. All dogs must be escorted into and out of The Dog Hut on a leash, by the owner or designated person or Dog Hut staff. The Dog Hut personnel will exercise reasonable judgment in all situations during your dogs stay at our daycare.

## **Payment for Daycare**

You agree to pay us an agreed upon fee before your dog is taken into care at The Dog Hut. These fees will be provided to you on our fee schedule. Prices are subject to change at any time.

## **Reservations**

Reservations should be made in advance for the days you would like him to attend. Although not required, we recommend at least one day of daycare per week to insure that your dog will keep up his social skills. Please notify us 24 hours prior if you need to cancel your reservation. We reserve the right to charge you for the day if we do not receive 24 hour notification.

## **Emergency**

In the event of an emergency, every attempt will be made to contact you or another person that you designate on the Application Form. You agree to not hold us liable for any decisions we make if we are unable to reach you or the other person you designate on the application.

## **Dog Health and Behavior**

Your dog must be in good general health and all dog vaccinations, Rabies, DHLPP and Bordetella must be current and records provided before your dog's first visit to The Dog Hut. Your dog must also be on a scheduled prevention program during flea and tick season. We reserve the right to not allow your dog to attend The Dog Hut if he looks sick or injured. If your dog becomes sick or injured, we will attempt to contact you or your designated person. However if we are unable to contact you, you agree to allow us to act in the best interest of your dog which may include transporting your dog to an available veterinarian. Any expense so incurred shall be paid by the owner of the dog in addition to other fees incurred for services provided at or by the facility. The Dog Hut reserves the right to determine if your dog's behavior towards other dogs is safe and appropriate and to refuse service and admittance to The Dog Hut.

## **Late Dog Pick Up**

If your dog is not picked up by 6:00pm and you have not notified us that you will be late (up to 6:30pm) we will charge you \$1.00 per minute. If you have notified us you will be late (up to 6:30) you will be charged an additional \$5.00. If you are later than 6:30pm, the charge is \$1.00 per minute.

## **Photo, Video, Recordings**

You agree that your dog may be videotaped, photographed and/or recorded and that these may be used in any media, including advertising and promotion of The Dog Hut.

**Owner Representation**

You represent that you are the owner of this dog and are authorized to enter into this agreement and you agree that all information provided is true to the best of your knowledge. You also agree that your dog has not been exposed to rabies, distemper or any other contagious illnesses within 30 days prior to starting daycare with The Dog Hut. You also agree that your pet has no illnesses or behavior problems that have not been disclosed to us and that you will hold The Dog Hut harmless for any loss, damage or expense resulting from your dog's stay including any person claiming damage or injury by your pet.

**Other Provisions**

This agreement can be changed only if in writing and signed by you and The Dog Hut. You acknowledge in the unlikely event that your dog is injured by another dog that you will not hold us responsible for the injury. If your dog injures another dog, you will be solely responsible for the injury. You agree that you will not hold us liable if your dog becomes ill during or after their stay at The Dog Hut.

\_\_\_\_\_  
Dog's Name

\_\_\_\_\_  
Owner's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
The Dog Hut Representative

\_\_\_\_\_  
Date

## Emergency Medical Release

Dear Client;

In the event that our staff deems your dog is in need of immediate veterinary care or your dog presents with a potential illness and we are unable to contact you or you are unable to pick up your dog, we will take your dog to a licensed veterinarian. If your personal veterinarian is located nearby, we will make every attempt to have your dog taken to them. If your veterinarian is unavailable or we deem that our dog needs immediate care, we will transport your dog to the nearest available veterinarian center.

I \_\_\_\_\_

Guardian of \_\_\_\_\_

give permission for The Dog Hut to act as my agent in the event of my dog needing medical attention. I further agree that I will be responsible for any and all cost on any veterinary care deemed necessary by the licensed veterinarian.

Signed:

Date:

Regular Veterinarian Name:

Phone#: