

# DAYCARE AGREEMENT

Owner's Name		Address		
Home Phone	Work Phone	City	State	Zip
Cell Phone	Email	Veterinarian		Phone

Pet's Name	
Date of Birth	Breed
Sex	Spayed or Neutered <small>(Required at 6 plus months)</small>

**GENERAL INFORMATION**

For the protection of your pet, proof of immunization records must be presented. Owner required to provide current vaccinations for Bordetella (canine cough), Rabies for all dogs 12 weeks or older, Distemper, Parainfluenza and Parvovirus.

How did you hear about the Doggie Den? \_\_\_\_\_

Has your dog ever attended Dog Day Care? \_\_\_\_\_ Where? \_\_\_\_\_

How did they do? \_\_\_\_\_

Do you have a multiple dog family? \_\_\_\_\_

Does your dog have playmates not residing in your household (neighbors, friends, family)? \_\_\_\_\_

Has your dog ever bitten another dog? \_\_\_\_\_ Has your dog ever bitten a person? \_\_\_\_\_

Is your dog possessive over toys? \_\_\_\_\_ Is your dog possessive over food? \_\_\_\_\_ Has your dog ever jumped a fence? \_\_\_\_\_

Are there any restrictions that should be placed on your dog's activities? \_\_\_\_\_ If yes, what activities: \_\_\_\_\_

Does your dog have any special concerns we should be aware of? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

**OWNER AGREEMENT**

- I \_\_\_\_\_, hereby certify that my dog(s) \_\_\_\_\_ are in good health, free of ticks and fleas; has not shown aggressive or threatening behavior towards any other dog or person; is 4 months of age or older and if older than 6 months is spayed or neutered.
- I accept and acknowledge that Cottonwood Pet Resort's Doggie Den is an open play environment and because of that there are inherent and potential risks, which even when monitored may result in property damage or bodily injury.
- I am solely responsible for any harm, including to any other dog(s), employees of Cottonwood or to the equipment and property of Cottonwood. I fully accept and assume all risks and responsibilities as a result in my dog(s) participation in the Doggie Den, including any veterinarian expenses incurred on behalf of my dog(s). In addition, sickness shall be defined to include any illness including but not limited to bordetella (canine cough) or any other form of contagious illness.
- I agree to allow Cottonwood Pet Resort to obtain medical treatment for my dogs(s), if, in its sole discretion it appears that he or she is injured, ill or any other behavior would reasonably suggest seeking medical treatment. I agree that I am fully responsible for the cost of any such medical treatment and for the cost of any transportation for the purposes of such treatment.
- Photos and video recording of my dog(s) by Cottonwood Pet Resort may be used for any purpose such as advertising or promotional purposes.
- In order to avoid late fees, we recommend you pick up your dog 15 minutes before the daycare closes. Dogs not picked up by 7p.m. on week days and 1p.m. on Saturdays will incur a late fee of \$10. If your dog is not picked up by 7:30p.m. week days or 1:30p.m. Saturdays, you will be charged overnight boarding of \$21.
- I, the undersigned, hereby acknowledge and agree that all provisions of this application and agreement are complete and accurate to the best of my knowledge. It is understood that I have read and understand the terms and conditions contained in the application and agreement.

Owner's Signature	Owner's Name (printed)	Date
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Den Hours: Monday-Friday 7a.m. – 7p.m. Saturday 8a.m.- 1p.m.  
 Christmas Eve and New Year's Eve 8a.m.- 1p.m.  
 Closed Sundays and these Holidays: New Years Day, Memorial Day, 4th of July,  
 Labor Day, Thanksgiving Day, Christmas Day