

Friends 4 Life Petcare Services Registration Form

In order for us to look after your dog, fill in this form to the best of your knowledge. Please read our terms and conditions and if you accept them sign and date the document in the space provided on the last page.

Section 1 : About You

Name :
Address :
Telephone :
Mobile :
Email :
Emergency Contact Name :
Emergency Contact Address :
Emergency Contact Number :
Emergency Contact Email :
How did you hear about us? :

Section 2 : About Your Dog

Name :
Date of birth :
Gender :
Breed :
Is your dog neutered/spayed? : Yes/No
Is your dog microchipped? : Yes/No
Chip number :
Are you the legal owner of this dog? : Yes/No
Vet Name :
Vet Address :
Vet Telephone :
Does your dog have Pet insurance? : Yes/No
Please confirm you understand you will be liable for any vet charges incurred while your dog is with us : Yes/No

Section 3 : Your dog's health

Is your dog up to date with its vaccinations? : Yes/No
Does your dog have any current health conditions? : Yes/No If yes, please provide details
Does your dog have any allergies? : Yes/No If yes, please provide details
Is your dog on any medication? : Yes/No If yes, please provide details

Section 4 : Your dog's behaviour and exercise

How does your dog behave around :

	Poor	Fair	Good	Excellent
Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Male dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Puppies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does your dog have good recall? : Yes/No

Do you give permission for your dog to be walked with other dogs? : Yes/No

Do you give permission for your dog to be let off the lead? : Yes/No

Do you give permission for your dog to be exercised in communal areas? : Yes/No

How many times a day is your dog usually walked?

Do you give permission for your dog to boarded with other dogs? : Yes/No

Do you give permission for your dog to be groomed if necessary? : Yes/No

What activities and exercise does your dog particularly like to do :

Please provide details of any restrictions that need to be placed on your dog's activities while at Friends 4 Life :

Is your dog, food aggressive? : Yes/No

If yes please give details

If no, do you give consent for your dog to be fed with other dogs? Yes/No

Please provide any other information you would like us to know about your dog :

Section 5 : Terms and Conditions

Please read carefully before signing

I understand that I am solely responsible for any and all harm caused by my dog while my dog is attending Friends 4 Life, or is using any services provided by Friends 4 Life.

- 1 I further understand and agree in admitting my dog that Friends 4 Life has relied on my representation that my dog is in good health and has not harmed or shown aggression or threatening behaviour toward any person or any other dog.
- 2 I further understand that during normal dog play, my dog may sustain injuries. All dog play is carefully monitored at Friends 4 Life to avoid injury, but scratches, punctures, or other injuries that may occur despite the best supervision.
- 3 I further understand that Friends 4 Life is a place where animals co-mingle in groups and I am responsible for the medical treatment of any injuries or illness that my dog receives while at Friends 4 Life.
- 4 I further understand that if I fail to provide proof of current vaccinations or if my dogs' vaccinations are found to be expired or otherwise incomplete, Friends 4 Life has the right to refuse service until current proof is provided.
- 5 I further understand and agree that any behavioural or health problems that develop with my dog will be treated as deemed best by the staff at Friends 4 Life, in their sole discretion, and that I will assume full financial responsibility for any and all expenses involved. I authorise Friends 4 Life to obtain medical records and/or treatments for my dog in the event of injury or illness from my vet or from the closest veterinary clinic. By signing this document I further direct said vet to provide such records upon request.
- 6 I further understand that my dog should be castrated (if male and over the age of 12 months) to enrol at Friends 4 Life. Bitches must not be brought when 'on heat'.
- 7 I further understand that even if my dog is vaccinated for Bordatella (Kennel Cough) there is a chance that my dog can still contract Kennel Cough. I agree that I will not hold Friends 4 Life responsible if my dog contracts Kennel Cough while attending Friends 4 Life.
- 8 I further agree to notify Friends 4 Life of any infectious and/or contagious disease or conditions my dog has been exposed to or is affected by. Such diseases and conditions include, but are not limited to Distemper, Hepatitis, Kennel Cough (Bordatella), Parvovirus, Corona virus, worms, Lyme disease, Fleas, Pregnancy, Infectious Skin Diseases and Intestinal Parasites.
- 9 I further agree to take any necessary efforts or precautions to insure that my dog is continuously free of contagious, infectious, or otherwise communicable diseases. I will report to Friends 4 Life, before arriving at Daycare, any contagious, infectious or otherwise communicable diseases, and will not be allowed to bring my dog to Friends 4 Life, regardless of scheduled days, until the condition is resolved. Resolution is determined by Friends 4 Life.
- 10 I allow and consent my dog to being photographed, videotaped, and/or used in any media or advertising by Friends 4 Life without prior approval by me. All such photographs, etc. are the property of Friends 4 Life.
- 11 I further understand that my dog has access to a fenced area outside and agree to assume full liability for damages to property or injury to my dog or others if my dog escapes.
- 12 I further agree to pay all fees set forth by Friends 4 Life and understand that I will be charged in full for my scheduled day regardless of my dog's attendance unless cancellation is received 24 hours or more before.
- 13 I understand that Friends 4 Life is not responsible for any lost, stolen, or damaged toys, leads, collars, beds, tags, clothing or any other item left with my dog.
- 14 I further understand and agree that each of the foregoing provisions are separate and severable and shall be in force and effect on each and every occasion my dog attends Friends 4 Life: This statement shall remain in full force and effect as between the parties until and unless otherwise amended or revoked, cancelled or superseded in writing signed by both parties.

Declaration

I certify that I have read and understand the terms and conditions set forth in this Statement, the Application form, including health forms, which are hereby incorporated into this Statement by reference. I agree to abide by the terms and conditions and accept all terms, conditions, and statements of this statement. I hereby release Friends 4 Life, their staff, and volunteers of any liability of any kind whatsoever arising from my dogs attendance and participation at Friends 4 Life.

Signed :

Print name :

Date (dd/mm/yy) :