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|  | THE PETS INN |

# New Client Contract

## CLIENT INFORMATION

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| --- | --- | --- | --- | --- |
| Owner Name:  |  |  | Phone:  |  |
| Address: |  |  | Email: |  |
| Pet Name & Breed:  |  |  | Pet sex & age:  |  |
| Pet Name & Breed:  |  |  | Pet sex & age:  |  |
| Pet Name & Breed: |  |  | Pet sex & age: |  |
| Rabies exp:  |  |  | DHPP exp:  |  |
| Bordetella exp |  |  | In case of Emergency Call: |  |
| Cats FVRCP |  |  | Veterinarian |  |

## SERVICE DESIRED

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| [ ]  Standard Boarding [ ]  Suite Boarding [ ]  Cat boarding Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Daycare (Arrival time\_\_\_\_\_) (Depart time \_\_\_\_\_)[ ]  Grooming FEEDING AND MEDICATION

|  |  |  |
| --- | --- | --- |
| [ ]  Owners [ ]  In houseAmount:  | Cups 0.5 1 1,5 2 3 4 5 |  |
| Frequency: | AM NOON PM |  |
| **Medication:**  |  |  |  |  |
| Name:  |  |  | Name:  |  |
| Amount: |  |  | Amount: |  |
| Frequency:  |  |  | Frequency: |  |

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## ADDITIONAL SERVICES

|  |  |  |
| --- | --- | --- |
| [ ]  Additional services. | * Bath during stay from $20 to $40 \_\_\_\_\_
* Vaccination DAPP \_\_\_\_\_
* Bordetella \_\_\_\_\_
* Taxi ($ depending on distance) \_\_\_\_\_\_\_\_\_\_\_
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## IMPORTANT INFORMATION FOR CLIENT

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| I, the undersigned, hereby acknowledge and agree that all the information provided in this form is complete and accurate to the best of my knowledge. I consent to The Pets Inn and any related entity use of such information for all lawful business purposes which may include, but is not limited to, for example, providing The Pets Inn services to you, operating The Pets Inn business, and using data that includes information about you and your pet for marketing or other purposes. I further acknowledge and agree that I have read, understand and agree to all the terms and conditions contained in the Release, Waiver of Liability, Assumption of Risk and Indemnification Agreement, as they may be amended from time to time, which are attached and fully incorporated into this application by reference. I hereby execute this Application and the Agreement for my pet, myself and my heirs, successors, representatives and assigns. I further attest that if I am not the owner or sole owner of the pet(s) for whom this form has been completed, my signature is sufficient to enter into this Agreement for and on behalf of any other owner or representative. If signing electronically, I hereby agree that my signature will be deemed an original and take the place of my wet-ink signature. If signing in ink, I hereby agree that a true and correct copy of this document may be produced in lieu of the original application. Should a copy be produced, I understand that it is legally enforceable and does not affect the terms of the application in any way.THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE THE OWNER(S) OF THE PETS INN OR RELATED PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ AND UNDERSTAND IT IN ITS ENTIRETY. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT.In consideration for your dog(s)/cat(s) being permitted to come to or be served by The Pets Inn, you agree to all of the policies, procedures, release, terms and conditions.WAIVER, RELEASE AND INDEMNIFICATION. YOU HEREBY AGREE TO EXPRESSLY AND FOREVER GENERALLY WAIVE, DISCHARGE CLAIMS, INDEMNIFY, RELEASE FROM LIABILITY, HOLD HARMLESS AND DEFFEND THE PETS INN, their invitees, owners, officers, directors, employees, contractors, volunteers, agents, representatives, lessors, and all others having an interest in The Pets Inn party (collectively, the “Releasees”) from and against ANY AND ALL INJURY, LIABILITY, CLAIMS, LITIGATION, ACTIONS, SUITS, COSTS, LOSSES, DAMAGES, ATTORNEY’S FEES, EXPENSES OR DEMANDS OF EVERY CHARACTER WHATSOEVER on account of, arising out of, resulting from or relating in any way to (i) any act or omission of the Releasees, (ii) your pet’s participation at the facility, services provided by The Pets Inn, or otherwise. YOU AGREE THAT THIS RELEASE IS BINDING ON YOU AND YOUR SUCCESSORS, HEIRS, LEGAL REPRESENTATIVES AND ASSIGNS. YOU ALSO EXPRESSLY AND FOREVER RELEASE THE PETS INN FROM ANY DUTY TO PROTECT YOU OR YOUR PET FROM INJURY OF ANY KIND, AND AGREE THAT ANY IMPLEMENTION PET SAFETY PRECAUTIONS BY THE PETS INN WILL NOT WAIVE THE PETS INN’S RIGHT TO BE INDEMNIFIED AS PROVIDED HEREUNDER, AND SUCH PRECAUTIONS WILL NOT ALTER THIS RELEASE. **ACCEPTANCE AND ACKNOWLEDGMENT OF RISK**. YOU FULLY UNDERSTAND THAT: (a) THERE ARE INHERENT AND POTENTIAL RISKS INVOLVED WITH INTERACTIONS BETWEEN HUMANS AND DOGS, AS WELL AS BETWEEN DOGS AND OTHER DOGS (OR CATS WITH OTHER CATS/HUMANS), WHICH MAY RESULT IN PROPERTY DAMAGE OR BODILY INJURY, INCLUDING BUT NOT LIMITED TO, PERMANENT DISABILITY, SICKNESS OR DEATH TO HUMAN OR DOG/CAT; AND (b) THERE MAY BE OTHER RISKS NOT KNOWN TO YOU OR THE PETS INN, NOR READILY FORESEEABLE AT THIS TIME (COLLECTIVELY, “RISKS”). YOU FULLY ACCEPT AND ASSUME ALL RISKS AND RESPONSIBILITY FOR ALL RISKS, INCLUDING, WITHOUT LIMITATION, ALL LOSSES, COSTS AND DAMAGES INCURRED AS A RESULT OF YOUR PET’S PARTICIPATION, INCLUDING ANY MEDICAL AND OR VETERINARIAN EXPENSES INCURRED ON BEHALF OF OR CAUSED BY YOUR PET. “SICKNESS” INCLUDES ANY ILLNESS NOT LIMITED TO BORDETELLA (KENNEL COUGH), BLOAT, OR ANY OTHER FORM OF CONTAGIOUS DISEASE. **Veterinarian Liability and Care.** The Pets Inn will have the right to obtain medical treatment for your pet, if, in The Pets Inn’s sole discretion, it appears that your pet may be ill, injured or exhibits any other behavior that would reasonably suggest that your pet may need medical treatment. The Pets Inn will first attempt to seek treatment from the veterinarian provided in the form, but will have the right to seek veterinary treatment from an alternative veterinarian if it is unable to reach or transport the pet to such veterinarian. If a pet passes away at the facility, he/she will be brought to his/her or the nearest veterinarian. YOU WILL BE FULLY RESPONSIBLE FOR ALL COSTS RELATED TO ANY MEDICAL TREATMENT, INCLUDING WITHOUT LIMITATION, THE COST OF ANY TRANSPORTATION FOR THE PURPOSE OF SUCH TREATMENT. You must also provide veterinary records to The Pets Inn upon request and hereby you declare in good faith that your pet is current in its vaccinations by signing this contract. THE PETS INN is not responsible for any damages or loss of personal property while your animals are receiving our services like leashes, blankets, beds, pet carriers, toys, bowls, feeders, etcetera. THE PETS INN is not responsible for any issue regarding your pets outside our premises. As a courtesy we can help you to transfer your pet from your car to our building and vice versa but we are not responsible for any incident outside our premises, this includes any liability during taxi service. Any pet that has not been picked up as scheduled will become property of THE PETS INN after seven days from the original departure date. By signing this contract, I declare that I have read, fully understand and agree to the terms, conditions and representations described in this document. I have given up substantial rights by signing this agreement and have signed it freely and voluntarily without any inducement, assurance or guarantee. I intend for this agreement to be a complete and unconditional release or all liability of TPE to the greatest extent permitted by law. I agree that if any portion of this agreement is held to be invalid or unenforceable, the remainder of this agreement will remain in full force and effect, and, this agreement is intended to control despite any statute or law that would otherwise protect me or my pet.**PARENT’S SIGNATURE: PRINTED NAME: DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
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