



# Fur Night and Day Pet Boarding and Daycare

APPLICATION FOR CARE

## GENERAL INFORMATION

Your Name (*List all names wanted on account*): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ Phone # : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
(*Someone other than you and not traveling with you*)

## PET INFORMATION:

Pet's Name: \_\_\_\_\_ (*Please check one*)  Dog  Cat

Sex:  Male  Female Spayed / Neutered  Yes  No (*All dogs over 6 months of age MUST be spayed/neutered*)

Birthdate: \_\_\_\_\_ and/or Age: \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_

Vet Hospital Name: \_\_\_\_\_ Phone # : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Contact: \_\_\_\_\_ Address: \_\_\_\_\_

## FEEDING

Breakfast(7AM): \_\_\_\_\_ Lunch(12PM): \_\_\_\_\_ Dinner(4PM): \_\_\_\_\_  
(*Please indicate the amount your pet eats during each time period. If they don't get that meal, leave it blank*)

Brand and Type of Food: \_\_\_\_\_

Would you prefer to use our food, Canidae/Felidae:  Yes  No

Is your pet allowed to have treats?  Yes  No

Any treat restrictions?  Yes  No If Yes is selected please explain below:

## SOCIAL INFORMATION

Where did you get your pet and when? \_\_\_\_\_

Does your pet live with other cats or dogs?  Yes  No If Yes, please list below:

Does your pet dislike males or females (human or pets)? If so which one? \_\_\_\_\_

Please describe your pets overall temperament: \_\_\_\_\_

## HEALTH INFORMATION

Does your pet have any health concerns that you are aware of?  Yes  No If Yes is selected please explain: \_\_\_\_\_

Is your pet on any medication?  Yes  No If Yes, please explain the condition below:

Does your pet have any allergies?  Yes  No If Yes, please explain the condition below:

**DOGS**

Has your dog played with a group of dogs, if so how many? \_\_\_\_\_

Does he/she fear any specific types of dogs or people? \_\_\_\_\_

Has your dog ever bitten someone?  Yes  No If Yes, please explain \_\_\_\_\_

Has your dog ever been in a fight or purposefully bitten another dog?  Yes  No  
If yes, please describe: \_\_\_\_\_

Has your dog ever tried to escape by digging/jumping or climbing fences?  Yes  No  
If yes, please explain: \_\_\_\_\_

Does your dog have any behavioral problems we should be aware of? \_\_\_\_\_

Is there a circumstance or situation that your dog is frightened of?  Yes  No  
If yes, please explain: \_\_\_\_\_

Is your dog toy possessive?  Yes  No If Yes, when? \_\_\_\_\_

**CATS**

Does your cat interact well with people?  Yes  No Is your cat declawed?  Yes  No

Has your cat ever interacted with other cats?  Yes  No If Yes, please describe: \_\_\_\_\_

Has your cat gotten into a fight with other cats?  Yes  No If Yes, please explain: \_\_\_\_\_

Does your cat have any behavioral problems we should be aware of?  Yes  No If Yes, please explain: \_\_\_\_\_

• I hereby state that the information I have given on this form is up to date and correct. And that I am the legal guardian of this(these) pet(s) or have been given permission by the guardian to organize care for this(these) pet(s).

• I understand that it is my responsibility to make sure that my pet is current on all required vaccinations before entering Fur Night and Day, LLC's facility. I understand my pet will not be permitted to stay on site if proper documentation of vaccinations is not provided. I understand that I am responsible for providing vet records to the facility. I understand that at 6 months of age, my dog(s) must be spayed/neutered to participate in daycare/boarding services. I certify that my Pet(s) is/are in good health and has/have not been ill with any communicable diseases in the 30 days prior to visit; if pet(s) have been ill, they have been cleared fit to participate in Fur Night and Days services by a veterinarian and are guaranteed not contagious to other guests.

• Kennel/Canine cough is a highly contagious upper respiratory illness that can occur most often when dogs are in close proximity to each other. I understand that kennel cough can occur even if my dog has been vaccinated. By bringing my dog to Fur Night and Day, LLC or any other location with multiple dogs, I understand that I am always subjecting my dog to a slight risk of catching the infection.

• I understand that scratches, punctures, sore or raw paw pads and other small injuries may occur during dog play and socialization. I understand that pets are unpredictable in nature and no amount of supervision can guarantee the prevention of pets being injured. I understand that illness may occur due to pets' interactions and close proximity with others, stress, or other variables.

• I understand it is my responsibility to ensure my pet is parasite free prior to arrival at Fur Night and Day, LLC. If a pet, which is presented for any service, is found to have fleas and/or ticks, it will be bathed at the owner's expense.

• The pet is not to be taken off the premises except by the consent of the owner with the exception of an incident as stated below.

• If the pet becomes seriously ill or injured, the owner shall be notified at once. If the owner does not inform immediately regarding measures to be taken, or if the state of the pet's health reasonably demands quick action, Fur Night and Day, LLC management shall have the right to call the veterinarian as designated on the application or if no veterinarian is designated or available at the time, to call a veterinarian of Fur Night and Day, LLC's choice or take the pet to said veterinarian in either case; or administer medicine or give other advisable attention, with management's discretion and judgment, and such expenses, shall be paid promptly by the owner of the pet.

• Fur Night and Day, LLC agrees to exercise due and reasonable care and to keep its kennel premises sanitary and property enclosed. It is the pet owner responsibility to determine whether this facility is conducive to their pet's needs. Pet owner is aware that employees of Fur Night and Day, LLC are not veterinarians and do not have backgrounds in animal medicine and are not expected to diagnose or detect illnesses in the pets at Fur Night and Day. Pet(s) owner acknowledges that no amount of vaccination requirement, sanitation or personalized care can prevent pets from contracting an airborne virus or communicable disease.

• If any charges for boarding, grooming, training, medicine, or veterinary services are not paid within ten (10) days after they are due, Fur Night and Day, LLC reserves the right to pursue legal action to acquire said funds. If pet is not called for within ten (10) days from stated pick up date, without contact from owner for changes in pick up date, the pet will be put up for adoption with a local rescue or shelter or otherwise be rehomed. Notice in writing of this action shall be mailed by registered mail to pet owner at the address given, no further notice shall be deemed necessary. Any excess amount of over charges will be given to the owner, any deficiency is deemed to be due and immediately paid by the pet owner. Fur Night and Day, LLC reserves the right to take legal action for balance due.

• All pets are boarded, groomed, trained, or otherwise cared for by Fur Night and Day, LLC staff without liability on Fur Night and Day, LLC's part for loss or damage from disease, death, running away, theft, fire, injury to persons, other pets, or property by said pet, or other unavoidable causes, due diligence and care having been exercised. Fur Night and Day, LLC reserves the right to refuse service to any pet for any reason, at any time, for reasons including, but not limited to pets lacking proof of vaccinations, pets displaying signs of untreated or potentially contagious conditions and/or pets exhibiting aggressive or unacceptable behavior.

I hereby agree to the above terms.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_