Malinda's Pampered Pets
Grooming * Boarding * Daycare

Background Information

Owner's Name(s):_____

Home Phone:_____ Mobile Phone:_____

Work Phone:_____ Other Phone:_____

Home Address:_____ City:_____ Zip:_____

Owner's Name(s):_____

Home Phone:_____ Mobile Phone:_____

Work Phone:_____ Other Phone:_____

Home Address:_____ City:_____ Zip:_____

Pet Information

Pet's Name:_____ Color:_____ Breed:_____

Approx Weight:_____ Age:_____ Sex:_____ Spayed/Neutered_____

Pet's Name:_____ Color:_____ Breed:_____

Approx Weight:_____ Age:_____ Sex:_____ Spayed/Neutered_____

Pet's Name:_____ Color:_____ Breed:_____

Approx Weight:_____ Age:_____ Sex:_____ Spayed/Neutered_____

Pet's Name:_____ Color:_____ Breed:_____

Approx Weight:_____ Age:_____ Sex:_____ Spayed/Neutered_____

Pet's Name:_____ Color:_____ Breed:_____

Approx Weight:_____ Age:_____ Sex:_____ Spayed/Neutered_____

Emergency Contacts

Please list individuals who have your permission to take your pets(s) from
Malinda's Pampered Pets

Name:_____ Relationship:_____ Phone:_____

Name:_____ Relationship:_____ Phone:_____

Name:_____ Relationship:_____ Phone:_____

Only persons listed above will be allowed to pick up your pet(s)

Your Veterinarian

Name:_____ Phone:_____ Fax:_____

Address:_____ City:_____ Zip:_____

About Your Pet

Describe your pet's temperament: _____

Has your pet been in any obedience/training classes? If so, what kind? _____

Has your pet been in any daycare or boarding before? If so, how did he/she respond to it?_____

Describe your pets fears & his/her reaction to them (i.e. noises, objects, people) _____

_____

List particular things your pet does not like (i.e. noises, objects, people, other pets) _____

_____

Has your pet had any problems with (please circle any that apply):

Barking Chewing Housetraining Aggression Sharing (toys, food, attention) Other_____

List any known allergies: _____

List any known health conditions or restrictions: _____

List any other concerns: _____

_____

How did you hear about us: _____

Owners Signature: _____ Date:_____

Malinda’s Pampered Pets
Boarding Pet Care Agreement

This is an Agreement between Malinda’s Pampered Pets and the pet owner whose signature appears below (hereinafter called “Owner”).

1. Owner agrees to pay the rate for pet care provided in effect on the date pet is checked into Malinda’s Pampered Pets.

Initial _____

2. Owner further agrees to pay all costs and charges for special services requested, and all veterinary costs for the pet during the period said pet is in the care of Malinda’s Pampered Pets. Owner further agrees to provide proof of preventative flea/tick treatment program and to be
financially responsible for any required treatment for fleas/ticks, if determined necessary by the pet care provider.

Initial _____

3. Owner further agrees that the pet shall not leave the facility until all charges due are paid by Owner or proper payment arrangements are agreed upon by both parties. Payment: The following credit card information will be used for all charges relating to pet Boarding and care while at Malinda‘s Pampered Pets;
Visa--MasterCard--Discover __ __ __ __- __ __ __ __- __ __ __ __- __ __ __ __
Expiration ___ / ___ Code __ __ __ __
Name as on Card: _____

Initial _____

4. By signing this Agreement and leaving pet with Malinda‘s Pampered Pets, Owner certifies to the accuracy of all information given about said pet. Malinda’s Pampered Pets reserves the right to deny admittance to Owner’s pet for any reason at any time.

Initial _____

5. Malinda’s Pampered Pets shall exercise reasonable care for the pet delivered by the Owner to the pet care provider. If interactive daycare is provided, Owner recognizes and accepts potential risks involved in such activity. It is expressly agreed by Owner and pet care provider that Malinda’s Pampered Pets liability shall in no event exceed the lesser of the current chattel value of a pet of the same species or the sum of $400.00 per animal admitted. The Owner further agrees to be solely responsible for any and all acts or behavior of said pet while it is in the care of the pet care provider, to include payment of costs for injury to staff or other animals or damage to facilities caused by the pet.

Initial _____

6. Owner specifically represents that he or she is the sole owner of the pet, free and clear of all liens and encumbrances.

Initial _____

7. Owner specifically represents to Malinda’s Pampered Pets that, to Owner’s knowledge, the pet has not been exposed to any contagious diseases within a thirty day period prior to check in.
During the period of this Agreement, Owner also agrees to notify Malinda’s Pampered Pets of any known exposure of pet to a communicable disease and hold pet out of attending Malinda’s Pampered Pets until pet is symptom free for a minimum of 60 days or with written veterinary clearance. Owner further agrees to maintain currency of vaccinations as required by Malinda’s Pampered Pets policy.

Initial _____

8. All Charges incurred by Owner shall be payable upon pickup of pet, or when billed by Malinda's Pampered Pets at address listed on contract. Malinda's Pampered Pets shall have, and is hereby granted, a lien on the pet for any and all unpaid charges resulting from services provided by Malinda's Pampered Pets. The Owner hereby agrees that in the event the charges are not paid when due in accordance with this contract, Malinda's Pampered Pets may exercise its lien rights upon ten days written notice given by Malinda's Pampered Pets to Owner by certified mail to address shown on contract. Malinda's Pampered Pets may dispose of pet for any and all unpaid charges, at private or public sale, in the sole discretion of Malinda's Pampered Pets, and Owner specifically waives all statutory or legal rights to the contrary. If such sale shall not secure a price adequate to pay such costs of pet care or other charges delinquent, plus costs of sale, then Owner shall be liable to Malinda's Pampered Pets for the difference. All monies realized by Malinda's Pampered Pets at such sale, over and above the charges due and costs of sale, shall be paid by to Owner.

Initial _____

9. If pet becomes ill or injured, or if the state of the animal's health otherwise requires professional attention, Malinda's Pampered Pets, in its sole discretion, may engage the services of a veterinarian or administer medicine or give other requisite attention to the animal, and the expenses thereof shall be paid by the Owner.

Initial _____

10. This Agreement contains the entire agreement between the parties. All terms and conditions of this Agreement shall be binding on the heirs, administrators, personal representatives and assigns of the Owner and Malinda's Pampered Pets.

Initial _____

11. Any controversy or claim arising out of or relating to this Agreement, or the breach thereof, or as the result of any claim or controversy involving the alleged negligence by any party to this Agreement, shall be settled in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by an arbitrator may be entered in any Court having jurisdiction thereof. The arbitrator shall, as part of the award, determine an award to the prevailing party of the costs of such arbitration and reasonable attorney's fees of the prevailing party.

Initial_____

Malinda's Pampered Pets Staff _____ Date _____

Owner _____ Date _____

Malinda's Pampered Pets
Grooming * Boarding * Daycare

Vaccination & Health Certification

One form per pet

Owner's Name(s):_____

Pets Veterinarian/Hospital Name:_____

Pets Name:_____ Breed/Color: _____

Age: _____ Sex:_____ Date spayed or neutered:_____

1. This is to verify that my pet is in good health & does not have any health conditions that make it dangerous for him/her to play & stay at MALINDA'S PAMPERED PETS. My pet is current on the vaccinations required for boarding.

2. I agree to notify MALINDA'S PAMPERED PETS of any and all future health conditions as they arise. In addition, I agree to complete & submit a new Vaccination & Health Certification if my pet contracts any communicable disease. I understand that this includes fecal issues & mouth warts.

3. I understand that my pet must be on a flea & tick preventative to come to MALINDA'S PAMPERED PETS. I authorize MALINDA'S to provide this preventative at an additional cost immediately upon arrival anytime I have not done so.

4. I give my veterinarian's office permission to release my pet's health & vaccination information directly to MALINDA'S PAMPERED PETS whenever requested.

5. Also, I give MALINDA'S PAMPERED PETS permission to bring my pet to my veterinarian when necessary for service while he/she is in their care. I understand that I am completely financially responsible for all of the costs associated with obtaining these services for my pet.

Owner's Signature:_____ Date: _____