



1328 W. Lake St.  
Chicago, IL 60607  
Phone: 312.397.9077  
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### Boarding & Day Care Client Agreement

**Tell us about yourself:**

Name \_\_\_\_\_

Address \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Fax \_\_\_\_\_

Work Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Email \_\_\_\_\_ Mobile \_\_\_\_\_

Who else is authorized to drop off/pick up your pet?  
\_\_\_\_\_

Instructions in case of emergency  
\_\_\_\_\_

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

**Tell us about your pet**

**Pet #1**

Name \_\_\_\_\_ Breed \_\_\_\_\_ Date of birth/age \_\_\_\_\_

Sex M / F \_\_\_\_\_ Spayed/Neutered Y / N \_\_\_\_\_

Weight \_\_\_\_\_ Color \_\_\_\_\_

How does your dog get along with other dogs?  
\_\_\_\_\_

How does your dog get along with people?  
\_\_\_\_\_

**Pet #2**

Name \_\_\_\_\_ Breed \_\_\_\_\_ Date of birth/age \_\_\_\_\_

Sex M / F \_\_\_\_\_ Spayed/Neutered Y / N \_\_\_\_\_

Weight \_\_\_\_\_ Color \_\_\_\_\_

How does your dog get along with other dogs?  
\_\_\_\_\_

How does your dog get along with people?  
\_\_\_\_\_

## Boarding & Day Care Client Agreement

### Tell us about your pet

#### Pet #3

Name \_\_\_\_\_ Breed \_\_\_\_\_ Date of birth/age \_\_\_\_\_

Sex M / F \_\_\_\_\_ Spayed/Neutered Y / N \_\_\_\_\_

Weight \_\_\_\_\_ Color \_\_\_\_\_

How does your dog get along with other dogs?

How does your dog get along with people?

Under what conditions does your dog growl, snarl, bark or cry?

Has your dog ever bitten or been bitten?

Does your dog jump fences?

If so, how high of a fence?

Has your dog used any daycare/boarding facility before? Explain:

### Tell us about your pet's health

Veterinarian: \_\_\_\_\_ Clinic \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Please describe your pet's general health. Include any current medical conditions

Allergies (if any) \_\_\_\_\_

Current medication: \_\_\_\_\_

Frequency and time administered \_\_\_\_\_

Date of last complete physical exam \_\_\_\_\_

Date of last fecal exam (for intestinal parasites) \_\_\_\_\_

## Boarding & Day Care Client Agreement

### Vaccinations

Rabies	Date administered	Date Due
DHLP	Date administered	Date Due
Parvo	Date administered	Date Due
Bortetella	Date administered	Date Due
Flea & Tic Preventative*	Last administered	

### Tell us about your pet's daily routine

Wake up time: \_\_\_\_\_

Regular food

Brand	Variety	Feed times
Quantity	Instructions	
Exercise/Walk	Times	
Typical Elimination Times	Sleep Time	
Favorite Activities/Toys		

Items brought/luggage/food \_\_\_\_\_

Comments, Questions or Concerns \_\_\_\_\_

I certify that I am the owner or the agent of the owner of the aforementioned pet(s) and that I am authorized to board the pet(s) and sign this form. I authorize Pet Care Plus, Ltd. to contact my veterinarian in order to confirm health, temperament and vaccinations. I give consent to Pet Care Plus, Ltd. to act on my behalf by obtaining veterinary care at my expense, should Pet Care Plus, Ltd. deem it necessary. Due to the many outstanding benefits of dog socialization and Pet Care Plus, Ltd. commitment to the safety and well being of my pet(s), I agree that the benefits of socialization outweighs the risks. Furthermore, I request a socialized environment for my pet(s) while under the care of Pet Care Plus, Ltd. I have read the schedule of fees and agree to pay all charges at check-in, unless previously arranged. I authorize Pet Care Plus, Ltd. to charge my credit card account, if so provided, for any outstanding invoices. I release Pet Care Plus, Ltd. (and its agents and employees) from any liability or claim due to injury or death of my dog, unless Pet Care Plus, Ltd. has been negligent in the care of my dog. I understand that under no circumstances will Pet Care Plus, Ltd. be liable for consequential damages or damages beyond the replacement value of my dog. I also understand that all pets must wear a collar or harness with ID securely attached at all times while at Pet Care Plus, Ltd.

By signing the below, I acknowledge that I have read this agreement in its entirety and agree to the terms.

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_