



Happy Hounds

Doggie Daycare

6331 Upper River Road Harrods Creek, Kentucky 40027
(502) 292-DOGS Fax: (615)-472-7989



CONTACT INFORMATION

Owner Name(s) _____

Address _____ City _____ Zip _____

Email _____ Cell # () _____

Work # () _____

Home # () _____

Emergency Contact _____ Phone () _____

Dog #1 Name _____ Breed _____ Color _____

Gender _____ Birthdate _____ Spayed/Neutered: Y N

Dog #2 Name _____ Breed _____ Color _____

Gender _____ Birthdate _____ Spayed/Neutered: Y N

Dog #3 Name _____ Breed _____ Color _____

Gender _____ Birthdate _____ Spayed/Neutered: Y N

The following person(s) may pick my dog(s) up from Happy Hounds without specific permission _____

IMPORTANT QUESTIONS

1. Has your dog ever scaled/jumped a fence? If yes, what height... _____

2. Where is your dog when left at home? (i.e. crated, free roam of the house, etc.) _____

3. Are there any breeds/types of dogs your dog dislikes or fears? If yes, please explain... _____

4. Has your dog ever shown any food or toy aggression? If yes, please explain... _____

5. What are your commands for the following:

Quiet command? _____ Potty command? _____

Down command? _____ "Drop that" command? _____

6. Has your dog ever visited a dog park/dog daycare? If yes, explain (i.e. where, when) _____

7. May we give your dog treats while at daycare? _____

8. Are there dietary restrictions? _____

9. Is there anything else we should know about your dog? _____



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STANDARD AGREEMENT

Owner Name(s) _____ Dog Name(s) _____

1. The Facility agrees to exercise due diligence and reasonable care, and to keep the premises sanitary and property enclosed. All dogs are handled or cared for by the Facility staff without liability on the Facility's part for loss or damage from disease, theft, fire, death, escape, injury or harm to persons, other pet(s) or property by said pet, or from unavoidable causes, due diligence and care having been exercised.

2. Should any pet become ill or seem to be in need of medical consideration, the Facility reserves the right to administer aid and/or transport to, and treated by any available veterinarian. Any expense so incurred shall be paid by the Owner of said pet in addition to other fees incurred for services provided at or by the Facility.

3. Owner agrees to pay the rate for services in effect on the date their pet is checked into the Facility. Prices are subject to change at any time, without notice. No pet will be released until all charges are paid in full. Cancellation fees may be applied for "no shows" or reservations cancelled less than 24 hour notice. Owner shall remain liable for all charges incurred for the care and maintenance of the pet(s) listed on this contract. Unless otherwise arranged for in advance, multi-day frequency packages unused within the established time frame will result in bonus days being forfeited or a pro-rated differential to be charged.

4. It is expressly agreed that the Facility's liability shall in no event shall exceed the lesser of the current tangible value of a pet of the same species or the sum of \$200.00 per animal. The Owner further agrees to be solely responsible for any and all acts or behavior of said pet while in the care of the Facility, The Owner of the pet agrees to pay reasonable attorney fees incurred by the Facility in the collection of any charges for service incurred by the pet's Owner.

5. Pet must be in good general health and Owner must provide valid proof of all required vaccinations on pet's first visit to the Facility, when vaccinations are updated, and/or annually. Pet must be also on a scheduled prevention program during flea and tick season, or when specified by the Facility. Pets arriving with fleas and/or ticks may be bathed at the Facility's discretion, at the Owner's expense. The Facility reserves the right to refuse service or admittance to any dog.

6. Pet must be picked up by Owner, or pre-approved Owner's agent by 7:00 pm. Charges may be incurred, at prevailing rate, for late pick up. Pet will only be released to Owner or pre-approved Owner's agent, as listed above. If Owner's agent is not specifically listed above, Owner must provide either written or verbal authorization directly to the Facility granting permission for the pet to be picked up by another individual; such permission will be considered specific to that day



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or unless this form is revised by Owner. It is understood that the Facility does not provide overnight accommodations. Unless otherwise arranged in advance by Owner or the pre-approved Owner's agent, pets not picked up by 8:00pm will be transported to, and boarded at, a location selected by the Facility, at the Owner's expense. Owner hereby grants a lien on said pet for any and all unpaid charges resulting from services provided by, pr through the Facility.

7. All attending pets will be safely escorted into and out of the Facility on a leash, by the Owner, Owner's agent, or staff of Happy Hounds.

8. Owner agrees that their pet may be videotaped, photographed, and/or recorded. The Facility shall be the exclusive guardian to the results and all proceeds of such tapings, photography, and recordings with the rights, throughout the world, an unlimited number of times in perpetuity, to copyright, to use and to license to others in any manner. The guardian further agrees that their pet(s) may be used in any and all media and in the promotion, advertising, sale and publicizing, and exploitation of Happy Hound LLC at no cost to Happy Hounds LLC.

I understand and agree to the above conditions.

Owner's signature _____ Date _____

EMERGENCY MEDICAL RELEASE

Dear Client:

In the event that our staff deems your dog is in need of immediate veterinary care, or your dog presents with a potential illness and we are unable to contact you, or you are unable to pick up your dog we will take your dog to a licensed veterinarian. If your personal veterinarian is located in Prospect we will make every attempt to have your dog taken to them. If your veterinarian is unavailable, or we deem that your dog needs immediate care, or your vet is out of our area, we will transport your dog to the nearest available veterinarian center.

I _____, as guardian of _____ give permission for Happy Hounds to act as my agent in the event of my dog needing medical attention. I further agree that I will be responsible for any and all cost of any veterinary care deemed necessary by the licensed veterinarian.

Signed _____ Date _____

Regular veterinarian _____ Phone () _____