



SCOOTER'S CANYON CANINES...

Can rover come over

Pet Information, Food & Meds

Pet Owner: _____ **Date:** _____

Pet Identification

Pet Name: _____ **Age:** _____ **Sex:** _____ **Weight:** _____

Breed: _____ **Spayed or Neutered:** Yes _____ No _____

Health Issues: _____

General habits

Does he/she have problems going outside in bad weather? _____

What are your pet's favorite playtime activities? _____

What are his/her favorite toys? _____

Is your pet crate trained? ___ Yes ___ No Where does your pet sleep at night? _____

Training

Is your pet leash trained? Yes ___ No ___

Does your pet come on command? Yes ___ No ___ What command do you use: _____

Interaction with others

Are there any animals or people the pet should stay away from? _____

How does he/she react to strangers? _____

Has he/she ever attacked anyone? _____

Food & Medications

Food Name: _____ **Amount of food:** _____

How many times a day: _____. Bring extra food just in case of a delay.

Medication: _____ **Dosage:** _____

Dates of Medication: _____

Purpose of Medication: _____ **Pill or liquid:** _____

How many times a day is it to be given? _____ **What times?** _____. Bring pill pockets

Allergies

Is your pet allergic to any dog treats, or ingredients? _____



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VETERINARIAN CONSENT

Veterinarian

Name: _____ Phone: _____

Address: _____

Hours: _____

Emergency (after hours) Veterinarian

Name: _____ Phone: _____

Address: _____

Hours: _____

If my pet becomes ill, Yvette Matson is authorized to take _____ (pet name) to the above veterinarian to diagnose my pet's condition. If it is after hours, I authorize Yvette to take my pet to the Emergency veterinarian. The veterinarian is to call me for authorization before treatment. If I am unavailable and this is an emergency, the veterinarian is hereby authorized to treat the animal at his/her discretion.

The charges for any vet visit or treatment of my pet is my sole responsibility. I confirm that I have notified my veterinarian and made the appropriate arrangements.

All animals must be up-to-date on their vaccinations before Yvette can care for them. All my animals are current on their vaccinations.

PET NAME: _____

Pet Owner NAME: _____ Date: _____

Signature: _____



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Pet Owner Information

Home Contact Mailing Address for Pet Owner

Name: _____

Address: _____

Phones: Cell _____ Cell: _____ Business: _____

Owner Emergency Contacts

Name: _____

Phones: Home: _____ Cell: _____ Cell: _____

Owner Requested Back-up Pet Care Giver Information

Name: _____ Phone: _____

Address: _____

Pet Owner: _____ Date: _____

Signature: _____



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Terms and Conditions

Scooter's Canyon Canines "Scooter's" and the "Dog Owner" named below agree as follows:

Health/Vaccinations: I agree I will not have my dog at Scooter's if I am aware of it exhibiting any signs of sneezing, vomiting, diarrhea, coughing, lethargy or any other indication of illness and otherwise certify that, to the best of my knowledge, my dog is in good health. I agree to provide Scooter's proof that all of my dog's required vaccinations are current prior to my dog's first arrival day and evidence they remain current for all subsequent arrivals. Required vaccinations are as follows:

<u>Vaccination</u>	<u>Vaccination Frequency</u>
Rabies and DHLPP	1 to 3 years depending on Vet's recommendation
Bordetella	Required.
Fecal Test	Recommended.
Corona	Recommended.

Dogs must be on a scheduled flea and tick prevention program. If fleas and/or ticks are discovered on my dog while under Scooter's care, Scooter's may administer a flea and tick bath and the Dog Owner agrees to pay Scooter's standard charge for that service.

Payment: I agree to pay the rate for services in effect on the date my pet is picked up at Scooter's.

Refusal of Services: Scooter's may, at its sole discretion, refuse to provide services or admit my dog.

Right to Photograph: I agree my dog may be videotaped and/or photographed by Scooter's. Scooter's shall be the exclusive owner of the results and proceeds of such taping or photography and may use in advertising or marketing.

Warranties and Representations: I warrant and represent that my dog is not now and has never been known to be aggressive towards or to bite or attack another animal or human. I warrant and represent all of the information provided by me in this Agreement is true and correct to the best of my knowledge and belief. I am the Dog Owner of the dog described above and I am authorized to enter into this Agreement.

Authority for Emergency Care: In the event my dog requires medical aid, I authorize Scooter's, in its sole discretion, to administer aid and/or obtain care by a licensed veterinarian listed above. I agree to pay such costs incurred by Scooter's and/or reimburse Scooter's for any such expenses paid by Scooter's. I authorize and instruct the veterinarian stated above to release to Scooter's any and all information regarding my dog.

Initial here _____



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Hold Harmless and Release of Liability: On behalf of all Dog Owners of my dog, I acknowledge and agree (a) that Scooter's shall not be liable for any injuries, illnesses or accidents involving my dog, including escape or loss of my dog, while my dog is in the care or custody of Scooter's and (b) to defend, hold harmless and indemnify Scooter's from and against any and all costs, expenses, attorney's fees, or damages arising out of any claim, action, suit, or proceeding concerning my dog and/or other dogs or animals in the case or custody of Scooter's and/or any natural person where such claim, action, suit or proceeding is caused by or relates to my dog while in Scooter's care.

Legal Fees: In the event a dispute arises with respect to this Agreement, the prevailing party shall be awarded all reasonable legal fees and related costs incurred in connection with the dispute.

Miscellaneous: The terms of this Agreement shall not be modified except in writing signed by Scooter's and the Dog Owner. This Agreement shall be governed by the laws of the State of Washington. Venue for any action shall be in Chelan County, Washington. The words "Dog Owner," "my," "I" and other similar words refer collectively to all Dog Owners of the above named dog. I certify that all Dog Owners have read and fully understand the terms of this Agreement and have given me the authority to enter into and execute this Agreement. This Agreement has no time limit and is valid and enforceable for any and all of my dog's future stays with Scooter's. Delivery to Scooter's of this Agreement signed by Dog Owner may be made by hand, mail or email.

DOG OWNER:

By: _____ Date: _____

Printed: _____

SCOOTER'S CANYON CANINES

By: _____ DATE _____

Printed: _____