

Welcome to Rover's Ranch

Owner's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email address _____

Pet's Name _____ Breed _____

Male Female Neutered/Spayed? _____

Weight _____ DOB _____ Color _____

Veterinarian _____

Is your pet on a flea/tick control program? _____

Feeding Instructions _____

Special Medical Issues _____

Does your dog get along with other dogs? _____

Pet's Name _____ Breed _____

Male Female Neutered/Spayed? _____

Weight _____ DOB _____ Color _____

Veterinarian _____

Is your pet on a flea/tick control program? _____

Feeding Instructions _____

Special Medical Issues _____

Does your dog get along with other dogs? _____

If anyone other than the owner has permission to pick up your pet, please list their names and numbers below:

How did you hear about Rover's Ranch?

Friend Veterinarian Yellow Pages Sign Other _____

Please list name of referral _____

As a condition of using our services for your pet(s), the following waiver & assumption to hold harmless must be signed:

By choosing to utilize the services, participate in the activities, bathing, and or boarding at Rover's Ranch, I agree to the following:

- To pay the rates that are in effect at the time my pet is at Rover's Ranch. I am aware that extra charges may be incurred and I agree to pay them at the time of pick-up. Examples include, but are not limited to boarding, bathing, group play, individual play.
- If a guest arrives at Rover's and signs of fleas or ticks are found, the guest will be given a flea/tick bath at the owners expense.
- If my dog participates in group play or play-day camps, I understand that an interactive play setting is not without some risk of injury. I understand, that despite all the dogs appearing healthy and being handled with the greatest amount of care and foresight, dogs are not always predictable and the unexpected may occur. I recognize that the benefits of interactive play groups are valuable to my dog and accept the potential risk. I further agree to pay veterinary/medical expenses incurred as a result of injury to or caused by my dog.
- If my pet appears ill, I authorize Rover's Ranch to engage the services of a veterinarian at my expense. I agree to pay all veterinary charges incurred while my pet is a guest at Rover's Ranch. I will not hold Rover's Ranch liable for failure to seek veterinary attention or for decisions made under this contract.
- I understand that Rover's Ranch will exercise all due diligence and care in the guardianship of my pet. I hereby waive and release Rover's Ranch, its employees, owners and agents from any and all liability of any nature, for injury or damage, including that which may result from the action of another dog including my own, and I expressly assume the risk of such damage or injury while my dog participates or attends any function at Rover's Ranch, while on the grounds or surrounding area thereto.

On behalf of myself and any or all other owners, I have read and agree to the terms of this contract. I warrant that I have the authority to represent any and all owners of this pet in signing this evergreen contract

Printed Name _____ Signed Name _____ Date _____

I ALSO UNDERSTAND THAT CHECK-OUT TIME IS 12 NOON & THAT THERE IS A FEE FOR DISPENSING MEDICATIONS _____ (initial)