

GENERAL APPLICATION

OWNER INFORMATION					
Name:	Additional Owner:				
Home Address:					
City, State, Zip:					
Home Phone:	Cell Phone:				
Work Phone:	Cell Phone:				
Email Address:					

DOG INFORMATION							
Dog #1 Name:		Male	Female				
Breed:		Age:					
Birthday:		Color	:				
Spayed or Neutered?	Yes	No	Weight:				
Micro Chip #:			License #:				
Dog #2 Name:			🗆 Male 🛛 Female				
Breed:			Age:				
Birthday:			Color:				
Spayed or Neutered? Yes No			Weight:				
License #:							

How did you hear about us? We like to reward referrals! _Internet Search _Social Media Other (please explain) _Friend/Family (name:) Vet Referral (practice name:)				
PICK-UP & EMERGENCY CONTACT INFORMATION				
If we need to contact you during the day, what is your preferred method?				
Who is authorized to pick up your dog(s)?				
1.Name: Phone:				
2.Name: Phone:				
Emergency Non-Owner Contact Information:				
Name: Phone:				
Veterinarian Information				
Practice/Doctor's Name:				
Phone Number:				



www.CanineCreatureComforts.com
Vaccinations (Attach or Fax to 610-296-8409)Required VaccinationsRabiesDHPPVBordetellaPlease Attach Vet Records or Fax to 610-296-8409

1.*I understand that I am responsible for any harm caused by my dog while my dog is attending Canine Creature Comforts Dog Daycare. I shall indemnify Canine Creature Comforts, Inc. against any claims made against the corporation or losses or damages of any kind suffered by Canine Creature Comforts as a result of my failure to inform Canine Creature Comforts of any pre-existing condition the dog may have (such as illness or aggression problems.) I understand and agree that in admitting my dog to Canine Creature Comforts, the facility has relied on my representation that my dog is in good health and has not harmed or shown aggressive or threatening behavior towards any person or any other dog.

2.*I understand and agree that Canine Creature Comforts will not be liable for problems, damage, or injury caused by my dog provided reasonable care and precautions are followed by day care staff. I understand that Canine Creature Comforts is fully insured. I release Canine Creature Comforts of any liability arising from my dog's attendance and participation at the daycare. I understand that the day care is a place where animals co-mingle in groups. I understand my animal may be placed in a crate for "time outs" not to exceed twenty minutes or if injured. Squirt water bottles are used for correction. In some cases dogs may be placed in a gentle leader to help calm them or for excessive barking. I understand that when dogs play in group's nicks and scratches may occur. If the injury is not serious, staff will make a judgment call and feel it is ok to leave the dog until the end of the day and let me know about it when I pick up. If the injury is serious I will be notified immediately.

3.*I understand and agree that any problem or injury that develops with my dog will be treated as deemed best by Canine Creature Comforts.

4.*I understand that if my dog is left at the day care for a period of three days without contact from the owner this dog will be considered abandoned and necessary steps will be taken to turn the animal over to the proper authorities.

5. *I recognize that there are inherent risks of illness or injury when dealing with animals. Such risks include, but are not limited to, problems resulting from rough play and kennel cough (doggie colds).

6. *I, as the owner, agree to be solely responsible for any and all acts or behavior or my pet while in the care of Canine Creature Comforts. If my pet should become ill or seem to be in need of medical consideration, Canine Creature Comforts reserves the right to administer aid and/or to use any available veterinarian. I, the owner, shall pay any expenses so incurred.

7. During your dog's stay, they may be placed in a crate to rest. The crate sizes range from xsmall to xxlarge. Your dog will be placed inside a crate that is an appropriate size for a short rest. By signing below, you are giving us permission to use our judgment regarding crate size. If your dog cannot go in a crate, please let us know and alternate accommodations will be made.

8. I understand and agree that Canine Creature Comforts does not require me to purchase a prepaid special daycare package and if I choose to purchase one, I will not be issued a refund. Please make sure you are committed to the service before pre-paying for it. I understand that I must provide 30 days written notice for cancellation of monthly daycare membership. I understand and agree that putting a deposit down for any service is to reserve a space for my dog, and Canine Creature Comforts does not provide refunds for deposits on certain services and they observe the right to deny refunds at their sole discretion.

9. I hereby give permission for images of my dog(s), captured during visits to Canine Creature Comforts, Inc. through video, photo and digital camera, to be used solely for the purposes of Canine Creature Comforts, Inc. promotional material and publications, and waive any rights of compensation or ownership thereto.

10. I understand that if I book boarding and cancel the reservation, there is no charge if the facility is not fully booked at the time. If the facility is booked, I will be charged a \$20 fee for non-holiday reservation and a \$50 fee for a holiday reservation.

Owner's Signature:

Date:

Canine Creature Comforts 286 Lancaster Ave Malvern, PA 19355 (610)296-8407 www.CanineCreatureComforts.com