



Where your 4-legged
kids come to play and stay!

Boarding and Daycare Contract

Date: _____ Name of Owner: _____ Email: _____

Address: _____

Phone: (H) _____ (W) _____ (C) _____

Secondary Emergency Contact Name: _____ Home: _____

Name of Dog: _____ Sex: M F Breed: _____

Date of Birth: _____ Age: _____ Color/Markings: _____

How did you acquire your dog: Breeder Shelter Family/friend Newspaper Craigslist Stray other: _____

How long have you owned the dog: _____ If adopted, do you know of any past history: _____

Veterinarian: _____ Telephone number: _____

Date of last veterinarian visit: _____ Is your pet up to date on all vaccinations: Yes or No

Medical illnesses and/or disabilities: _____

You MUST provide a copy of current up to date vaccination records, supply an update copy as new vaccinations are administered. Rabies immunization, distemper, hepatitis-lepto and canine cough vaccinations as required by law.

Flea and tick prevention: _____ Last time administered: _____

Over the of counter and/or prescribed medications/vitamins: _____

If so, please list dosage and directions: _____

Has your dog been spayed or neutered: Yes or No If yes, date: _____ If no, all dogs over 4 months are required to be spayed or neutered in order to participate in daycare and/or boarding.

Brand/type of dog food: _____ Dry or Wet Treats: Yes or No

Does your pet have food allergies: Yes or No If yes: _____



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We feed twice daily (Breakfast and Dinner), will your pet require a lunch feeding: Yes or No Bowl: Metal or Plastic

Feeding quantity: ¼ cup, 1/3 cup, ½ cup, 1 cup, 1.5 cups, 2 cups, 2.5 cups, 3 cups, or _____ cups per feeding

Instructions: _____ Is your dog food aggressive: Yes or No

We have provided this contract so that you may further understand what is required of you and your dog before enrolling Paws 'N Play.

You will be asked to read and sign this contract at the time of your dog's acceptance into our facility.

I, _____ (owner), hereby certify that my dog _____ is in good health and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) have not harmed or shown any aggressive or threatening behavior towards any person or any other dog. Paws 'N Play, Inc. (PNP) agrees to exercise due and reasonable care in the handling of dogs, and in keeping the facility properly enclosed and sanitary. PNP does not assume and shall not be held responsible for any liability with respect to the dog listed in this agreement, of any kind, character, or nature whatsoever, arising out of or from the boarding of this dog, or any damages which may accrue from any other cause whatsoever, including loss by fire, theft, running away, injury to persons, animals or property, unavoidable causes, or death or injury to any other animal caused by the named dog(s) during the term of this contract, whether this dog be on the premises of the Kennel or not, and the owner of said dog agrees hereby to be and is solely responsible for any and all acts of behavior of said dog at any time within the term and time for the contract. In no case shall PNP be in any way liable or responsible. The responsibility and/or liability of PNP, in no event shall exceed the sum of One Hundred Dollars (\$100.00) and the undersigned agrees to limit the responsibility of One Hundred Dollars (\$100.00) and no more and agrees not to claim any damages against said PNP of any nature whatsoever, either by way of contract, equity, negligence or otherwise, in excess of said sum.

I HAVE READ AND UNDERSTAND THE FOLLOWING:

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are in the care of PNP and release PNP of any liability arising from my dog's attendance and participation at the daycare.
2. I recognize that there are inherent risks of illness or injury when animals are allowed to be in close contact with one another. Such risks include, but are not limited to, problems resulting from rough play and canine cough (doggie colds).
3. I further understand and agree that in admitting my dog(s) to PNP, the staff at PNP have relied on my representation that my dog(s) is/are in good health and have not harmed or show aggressive or threatening behavior towards any person or any other dog.
4. I understand that my dog(s) will be playing in open areas with other dog(s) and accept that when dogs play in groups, they will get dirty, and nicks and scratches may occur, as well as any other inherent risks that are involved and I hereby release PNP of any liability; I further understand and agree that PNP staff and volunteers will not be liable for any or all problems which may develop.
5. I further understand and agree that any problems which develop with my dog(s) will be treated as deemed by PNP staff and



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volunteers, at their sole discretion, and that I assume full financial responsibility for any and all expenses involved if I or PNP decides to obtain medical treatment.

6. I accept that if my dog causes any excessive damage to the facility that I could, and will be, asked to pay for repairs.

7. I understand that if my dog is not spayed or neutered by 4-6 months of age, they will not be allowed to participate in PNP with other dogs, or they will have to stay home.

8. I further understand that if my dog shows any signs of aggression towards other dogs, that their acceptance into PNP will be reevaluated. They will be given between 1 and 3 chances, depending on the situation surrounding the aggression before they are forbidden to participate in PNP.

9. Human aggressive dogs or dogs with fear issues, won't be allowed to stay at PNP.

10. As a responsible pet owner, I promise to keep my pet up-to-date on all vaccines, including Bordetella and Rabies, and all other state required vaccines. It is required by PNP that you provide official updated records from a veterinarian before you are allowed to attend daycare. PNP is not responsible for informing of due dates on vaccines nor will PNP provide vaccine records for any reason. Furthermore, when pet vaccines are updated, a copy must be provided to PNP in order for our records to stay updated, otherwise PNP will assume that your pet isn't current on vaccines and will be asked not to attend daycare until 7 days after actual vaccines are administered.

FEES: You are responsible for any medical expenses, medication, special dietary expenses, or other special costs incurred during your dog's stay with PNP.

EMERGENCY: In the event of an emergency, PNP staff will first attempt to contact the owner, followed by an attempt to contact the emergency contact person listed. PNP may also directly contact the veterinarian listed, or any emergency veterinarian of PNP's choice, if the circumstances are deemed such that immediate treatment is necessary. PNP staff retains sole discretion in emergency matters, without liability, and the owner of the dog agrees to promptly pay for all medical treatments received. I certify that I have read and understand the policies of PNP as set forth on the preceding page and that I have read and understand the conditions and statement of this agreement. I acknowledge and accept that all the above policies refer to daycare, as well as overnight stays, and this release serves as accepting these conditions for both services.

OWNER HEREBY ACKNOWLEDGES HAVING READ THIS CONTRACT.

Owners signature: _____ Date: _____

Staff witness signature: _____ Date: _____



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AUTHORIZATION FOR MY PET'S EMERGENCY MEDICAL CARE

I, _____, of (address) _____, this _____ day of _____, 20____ pursuant to the laws of Maryland, willfully and voluntarily authorize the bearer of this document [Bearer] with lawful authority to temporarily act on my behalf for the care of my pet: 1. James Warren, owner/operator 2. _____.

SECTION 1: GENERAL GRANT OF POWERS: The Bearer of this document may act for me and in my name in any way that I could as if I were personally present and exercising such power with respect to my pet's daily care such as feeding, watering, bathing, housing and social interaction; and emergency medical care and to require, withhold, or withdraw any type of medical treatment or procedure, even though my pet's death may ensue, provided a licensed veterinarian is in agreement with the procedures being authorized. The Bearer shall have the same access to my pet's medical records that I have, including the right to disclose the contents of those records to third parties. No procedure may be authorized exceeding \$_____ without my specific consent, obtained by phone or email.

I can be reached at the following numbers: Home _____ Work _____ Mobile _____. My email address is _____. In case of emergency, my primary veterinarian shall be _____, or any veterinarian recommended by him. I also approve treatment by James Warren and/or any veterinarian recommended by him. _____ were recommended by _____ Animal Hospital, so they are acceptable to me for emergency medical treatment.

SECTION 2: SPECIFIC RESTRICTIONS: The Bearer is specifically prohibited from giving consent to euthanize any of my pets, except and unless I cannot be reached by phone or email, and two veterinarians agree that the pet is suffering, or will unconscionably suffer to such a significant degree, or that such pet will most likely perish because of medical reasons, prior to my return home on _____, 20__. No pet shall be euthanized for behavioral reasons, only for such humane medical reasons.

SECTION 3: THIRD PARTY RELIANCE: No Person who relies in good faith on the authority of the Bearer under this instrument shall incur any liability to me, my estate or my personal representative. In order to induce third parties to accept the Bearer's authority, I hereby indemnify and hold harmless any third party who acts in good faith reliance on the Bearer's directions concerning my pets.

SECTION 4: TERMINATION OF POWER: The Bearer's powers and authority enumerated herein shall be effective from _____, 20__ to _____, 20__, or until I return home, or until revoked by me or until such power is revoked automatically by operation of law.

Owners signature: _____ Date _____ Time _____

Witness signature: _____ Date _____ Time _____



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PET QUESTIONNAIRE!!!

1. Check the box below that best represents your dog's overall level of exercise routine:
 - a. Couch Potato: Spends days sleeping, occasional walks and/or playtime with humans or other dogs.
 - b. Mild Exerciser: Short daily walks and/or regular playtime with human or other dogs.
 - c. Moderate Exerciser: Long or multiple walks daily and/or regular playtime with human or dogs.
 - d. Athlete: Regular jogs/runs and/or participates in dog sports such as agility, flyball, frisbee, etc.

2. Which of the following best describes your dog's level of socialization with other dogs:
 - a. None – No knowledge of other dog interaction
 - b. Minimal – On leash encounters only
 - c. Moderate – Some off-leash playtime on occasion with visitor's/neighbor's/friend's dog(s)
 - d. Extensive – Regular visits to dog social events, off-leash dog parks, dog daycare, etc.

3. Has your dog had any problems previously in an off-leash social environment?
 - a. No Yes, (check all that apply)
 - b. Altercation or fight at a public dog park
 - c. Altercation or fight with a neighbor or friend's dog
 - d. Fearful reaction in a group of dogs
 - e. Dismissed from a prior dog daycare or social playgroup program (complete item 5)
 - f. Other (please describe) _____

4. Only complete if you answered yes in 3e that your dog was dismissed from a prior program.
What reason were you given as to why your dog was dismissed?
 - a. My dog was injured, no medical treatment required
 - b. My dog was injured and required medical treatment
 - c. Another dog was injured, no medical treatment required
 - d. Another dog was injured and required medical treatment
 - e. A person was injured, no medical treatment required
 - f. A person injured and required medical treatment

5. Does your dog have any physical disabilities? Yes No If yes describe: _____
 - i. Any restrictions on your pets activities or movements?
 - ii. No jumping No running No hard play No contact with other dogs Other

6. On what type of surface does your dog generally go to the bathroom (e.g., grass, mulch, pee pads)?

7. Does your dog have any bathroom-related issues: _____



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8. How often do you brush or comb your dog's coat? _____ Nails clipped: _____
9. Does your dog have any sensitive areas on his/her body? Yes No If yes, where: _____
10. Where are your dog's favorite petting spots: _____
11. How frequently is your dog walked: _____ Average length of walks: _____

Household Information

1. Are there other dogs within the household: Yes or No If yes, please complete:

Breed	Age	Sex	Spayed or Neutered
1. _____	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. _____	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. _____	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. _____	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are there any other animals within the household? Yes or No If yes: _____
3. How does the dog get along with the other animals: _____
4. Are there children in the household: Yes or No Age(s) of the children: _____
5. How does your pet react to children: _____
6. How does your dog react to a strangers/contractor/workers coming into your home or yard: _____
7. Does your dog ever bark or growl at anyone passing outside your home or yard: Yes or No
8. Are there any types of dogs your dog seems to automatically fear or dislike: Yes or No
If yes, please describe _____
9. How does your dog react to puppies or smaller/tiny dogs: _____
10. How does your dog react to strange animals approaching them: _____
11. Does your dog play with other dogs: Yes or No If yes, how often: _____ If yes, which
type? Male and females Only males Only females
Comment: _____
12. What kinds of games does your dog play with other dogs: _____



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13. What kinds of games does your dog play with people: _____
14. Is your dog toy aggressive: Yes or No If yes, describe: _____
15. Does your dog know any tricks: Yes or No If yes, describe: _____
16. Does your dog know any commands: Yes or No if so, please check all that apply
- Sit Stay Down Come Heel Rollover Kisses High Five Other: _____
17. Has your dog had obedience training: Yes or No If yes, how did your dog receive the training?
- Attended one group class
 Attended more than one level of group classes (beginner and intermediate, etc.)
 Dog was sent to a board and train program
 Private Sessions in home
 Other, please explain: _____
18. Which of the following best describes the use of obedience cues with your dog at home?
- Key part of daily communication
 Used when we go on walks or have people over
 Used occasionally to better control behavior
 Rarely used
 Not applicable
19. What kind of a collar do you use to walk your dog?
- Buckle Nylon/Chain Choke Collar Harness – Leash Clips on Back Harness – Front Clip Head Collar
 Prong/Pinch Other: _____
20. Is it effective in keeping him/her under control: Yes or No
21. Has your dog ever gotten away from someone when out for a walk: Yes or No If yes, please explain circumstances: _____
22. Is your dog a house or outside dog: _____ Where does your dog sleep? Inside the house Outside the house Inside/Outside-varies
In which room in the house does your dog sleep: _____
Where in the room does your dog sleep: Crate/kennel Owner's bed Dog Cushion/Bed Other (Please describe) _____
23. Has your dog ever jumped up on someone: Yes or No If yes, describe: _____
24. How does your dog act when you get home at the end of the day: _____



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25. What does your dog do to show he/she is happy? _____
26. What does your dog do to show he/she is upset? _____
27. Is your dog allowed on the furniture at home: Yes or No
28. Does your dog have any problems in any of the following areas: Yes or No If yes, please explain.
- Mouthing: _____
 - Housetraining: _____
 - Barking: _____
 - Digging: _____
 - Ignoring commands: _____

Dog Behavior Information

1. Are there any particular types of people your dog seems to automatically fear or dislike: _____
2. Does your dog have any signs of separation anxiety: Yes or No If yes, describe _____
3. Has your dog ever growled at someone: Yes or No If yes, describe: _____
4. Has your dog ever bitten a person: Yes or No If yes, describe situation and injuries: _____
5. Has your dog ever bitten another animal: Yes or No If yes, describe situation and injuries: _____
6. To the best of your knowledge, what does your dog do when you're not at home: _____
7. When you're not home, where does your dog stay: _____
8. Can your dog climb/jump a fence: Yes or No If yes, describe: _____
Height of the fence: _____
9. Has your dog ever escaped from your house or yard: Yes or No If yes, describe: _____
10. How would you describe the energy level of your dog? Low Moderate High
11. Has your dog ever chased or tried to chase a small animal: Yes or No If yes, describe: _____



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12. Has your dog ever chased or wanted to someone on a skateboard or bicycle: Yes or No If yes, describe _____
13. Has your dog ever chased or tried to chase a car and lawn mower: Yes or No If yes, describe: _____
14. Is your dog frightened by thunderstorms: Yes or No If yes, describe: _____
15. Is your dog frightened or nervous around anything else: Yes or No If yes, describe: _____
16. Does your dog play with any toys: Yes or No If yes, describe: _____
17. Does your dog have toy aggression towards humans and/or other animals: Yes or No If yes, describe _____
18. Have you ever noticed your dog stopping and staring at another animal: Yes or No If yes, describe: _____

Do you have any other comments or information that would assist PNP in making your pet's experience at our facility pleasurable? _____

WE THANK YOU FOR ENTRUSTING THE CARE OF YOUR PET WITH PAWS 'N PLAY