



Poway Animal Keeper Boarding Contract

Customer Name _____ Date _____

Customer Street _____ City _____

Customer State _____ Zip _____ Email _____

Date of Pick Up _____ **Approx. Time of P/U?** _____

Pet Name 1 _____ Sex _____ Breed _____

Pet Name 2 _____ Sex _____ Breed _____

This Contract is between The Animal Keeper & the pet owner whose signature appears below.

- 1. I understand that Canine Cough is unpreventable and that there are over 100 strains of it. Due to the fact that this is an **airborne** virus; The Animal Keeper is not responsible..... Initials _____
- 2. Owner agrees to pay the daily boarding rate and understands the charges..... Initials _____
- 3. I understand that if I pick up my pet(s) before 12 noon, that I will not be charged for the day. If pet is not officially checked out at 12 noon, I will be charged an afternoon pick up fee..... Initials _____
- 4. The Animal Keeper is not responsible for any loss or damage of any owner toys, carriers, etc..... Initials _____
- 5. The Animal Keeper is not responsible for any pre-existing or breed-related conditions..... Initials _____
- 6. All guests must be healthy and it is recommended that they have had a physical within the last 3 months. The Animal Keeper is not responsible for any conditions that are stress induced (i.e. diarrhea, skin allergies, eye discharge, etc.)..... Initials _____

RECREATIONAL PROGRAMS

You can sign up your pet(s) for the following fun filled activities! The one-on-one playtime, or a play group will delight your pet! All pets love getting attention and they love to play! That is what The Animal Keeper is all about! Having FUN! **Please specify days.**

- 7. Playtime**\$12**—One on One: 20 minute play time with an Attendant..... _____
- 8. 1-Hour Group Play with Friends **\$12** _____
- 9. In-House Big Dog Camp.....**\$22**— play with their big friends..... _____
- 10. In-House Tiny Tot Camp.....**\$22**—play with their small friends..... _____
- 11. Massage.....**\$5**—10 minute massage..... _____
- 12. Treadmill.....**\$5**—15 minutes on the treadmill..... _____
- 13. Tuck In Service**\$5**— Turn Down~Cuddle Time..... _____
- 14. **Save \$4-\$21 on Packages: Play _____ Prince/Princess _____ Senior _____ Sports _____**

All dogs in a play group must be spayed or neutered. They must not be shy or timid. All pets **MUST BE TESTED IN A GROUP PLAY TRIAL FIRST**. Once the pet passes the trial, said pet is allowed into Big Dog Camp or Tiny Tot Camp on the trial day if the pet is comfortable. A pet that is misbehaving will get three "time-outs". Playing rough, mounting, excessive barking, etc. is not acceptable in Big Dog Camp or Tiny Tot Camp. Pet will be dismissed from Big Dog Camp or Tiny Tot Camp that day and be given a playtime.

THE ANIMAL KEEPER MENU

The Animal Keeper serves two main ingredients: Taste of the Wild (TOW) Grain Free (GF) SALMON or BISON/VENISON. We serve kibble and we also have canned.

The Animal Keeper serves the main meal once a day; in the morning. However, we will feed those guests over 75 lbs. or puppies and special needs pets, twice a day. Special needs pets will have to be approved by the Manager. We are very cautious about bloat and any sensitive issues that may arise during their stay. Serving a delicious high calorie diet will allow us to monitor their appetite and bowel movements as well.

15. Is Food provided by Owner? Y ___ N ____.....If No-Select Diet: TOW Salmon (GF) _____ TOW Bison & Venison (GF) _____

If Owner is providing own food, please pre-package and portion if possible.

16. Is Own Food pre-packaged? Y___N___ Exact Amount? Y___N___ EXTRA? _____

17. Owner is aware of the \$2 Own Food charge..... Initials _____

**Encinitas Ph#: (760) 753-9366
Fax#: (760)753-0296**

**Oceanside Ph#: (760) 941-3221
Fax#: (760)941-2279**

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18. **Delicious treats for your pet? Frozen Yogurt Treat—\$5___ Peanut Butter Kong—\$5___ Peanut Paws—\$5___**

SPA AND GROOMING PACKAGES

- 19. My pet(s) will be offered a DISCOUNTED bath when here for 3 nights or more (Discounted Bath includes bath, blow dry, brush-out & ears cleaned).....Decline ___ Accept ___
- 20. My pet(s) can enjoy a BBN (BBN includes bath, blow dry, brush-out, ears cleaned and nails trimmed).....Decline ___ Accept ___
- 21. We offer Full Grooming Services here at The Animal Keeper. If your pet(s) need the ultimate spa day, we recommend a Full Groom (includes Breed specific or Customer requested haircut, bath, blow dry, brush-out, nails trimmed, ears cleaned, sanitary trim & anal glands expressed if needed).....Decline ___ Accept ___
- 22. We also offer a variety of different spa treatments including Flea & Tick bath/treatment, De-Skunk, Shed Relief, Massage, Blueberry Facial, Medicated bath, Mineral Rich bath, Sanitary Trim, Paw Trim, Anals and more.....Decline ___ Accept ___
Ask for details.

HEALTHY PET PROTECTION PROGRAM

- 23. Healthy Pet Protection Program.....Pre-existing conditions are not covered
- \$15 a stay covers up to \$500 of a vet bill.....Decline ___ Accept ___
- \$25 a stay covers up to \$1,000 of a vet bill.....Decline ___ Accept ___
- Any stay over ten (10) days is a \$2 per day charge.....Initials _____

MEDICATION- IF YOUR PET(S) ARE ON MEDICATION PLEASE FILL OUT THE MEDICATION CONTRACT

24. Any pre-existing conditions we should know about? _____

PHOTO RELEASE

25. I consent to the unrestricted use by the Animal Keeper of all photographic or other images created by AKM/Pet Suites, and my pets name for use in social media & website placement, or other printed materials....Initials _____

EMERGENCY CONTACT NUMBERS

Please list all emergency phone numbers during your pet’s stay at The Animal Keeper. We must be able to reach you or your listed emergency contact. Cell Phones can get “out of range”, so please make sure numbers are accessible. If out of country, please provide email. Thank you!

- 1. _____
- 2. _____
- 3. _____

In the event of any medical emergency, the Manager will always contact you first. If you or the person’s listed above cannot be reached, The Animal Keeper will make any decisions necessary for the health and well-being of your pet.

***** I fully understand that I am financially responsible for these decisions Initials _____**

Name of Current Animal Hospital _____

\$\$\$ Spent = Points = Rewards Ask about our PAWS REWARDS Program Refer a Friend = Points = Rewards

Would you like to sign up for our PAWS REWARDS Program? Start earning points today...great rewards!!! Y ___ N ___

***** Owner certifies to the accuracy of all information given about said pet. *****

OWNER _____ DATE _____

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