New Client Form

Owner's Information: (please print clearly)

First and Last Name: _____ Date: _____

Address: _____ City:_____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Email: _____

Second Owner's Name: _____ Phone: _____

Emergency Contact Name (someone outside of your household): _____

Relationship: _____ Emergency Contact Number: _____

How did you hear about us? ❒Word of Mouth ❒Friend Referral ❒Vet ❒Drive By ❒Internet

❒Phonebook ❒Oshkosh Area Humane Society ❒Other _____

Dog's Information:

Dog's Name: _____ Breed: _____

Age: _____ DOB: _____ Age when acquired: _____

Where did you obtain your dog? _____

Sex: ❒M - ❒Neutered ❒F - ❒Spayed Weight: _____ Color: _____

Veterinarian's Information:

Vet Clinic: _____ Phone: _____

Date of last visit: _____ Reason: _____

Please attach vaccination records or have your vet fax them to 920.685.5923

Required: Rabies and Distemper *Bordetella is highly recommended for any service*

List any known allergies: _____

Has your dog had fleas or ticks in the last year? ❒Yes ❒No

Is your dog on heartworm prevention? ❒Yes ❒No

Feeding Schedule:

❒Breakfast ❒Lunch ❒Dinner

Amount per feeding: _____

If free fed, maximum amount your dog eats per day: _____

Type of Food: ❒Dry ❒Liquid ❒Solid ❒Can ❒Frozen ❒Raw ❒Patty

❒Bring Own - Brand:_____ ❒House Food (Fromm Gold) additional $2.50 per day

Special feeding instructions/additional diets: _____

If you plan on bringing your dog for a day of daycare, will you be bringing a lunch or snack?

❒Yes ❒No If yes, please explain:_____

Medications:

Name of medication: _____

Reason for medication: _____

❒As Needed ❒Morning ❒Afternoon ❒Evening ❒Specific Date/Time: _____

Type: ❒Pill ❒Tablet ❒Ointment ❒Drop ❒Liquid ❒Injection ❒Other _____

Dose _____ ❒CC ❒ML ❒Pill ❒Drop ❒Pack ❒Cup ❒Spoon ❒Other _____

Special medication instructions: _____

Additional medications:_____ _____

All About Your Dog:

Does your dog have any problems in any of the following areas? ❒Ears ❒Tail ❒Paws/Nail trims

❒Mouth ❒Hindquarters ❒Being Brushed ❒Hip/Joint

If yes, please explain:_____

Does your dog have any physical problems or disabilities that we should be aware of? ❒Yes ❒No

If yes, please note any restrictions: _____

_____

Does your dog prefer to play with: ❒Male dogs ❒Female dogs ❒Both ❒Not dog friendly

Is your dog afraid of any types of other dogs? ❒Yes ❒No If yes, please specify: _____

_____

Has your dog ever broken skin or caused a puncture by biting another dog? ❒Yes ❒No

If yes, under what circumstances?_____

Has your dog ever growled or snapped while sharing toys or objects with another dog? ❒Yes ❒No

If yes, please explain: _____

_____

Has your dog ever growled or snapped at anyone taking food, toys or objects away? ❒Yes ❒No

If yes, please explain:_____

_____

Has your dog ever broken skin or caused a puncture by biting someone? ❒Yes ❒No

If yes, under what circumstances?_____

_____

How does your dog react to strangers in public? _____

Has your dog played off-leash with other dogs? ❒Yes ❒No

Briefly describe (family dogs, dog park, training class, none, etc): _____

_____

How does your dog react to puppies? _____

What is your dog's training history? ❒No formal training ❒Trained myself ❒Puppy class

❒Basic manners class ❒Advanced group class ❒Private training sessions ❒Behaviorist Sessions

Are there any other behavioral or training issues that you feel you should inform us of? ❒Yes ❒No

If yes, please explain:_____

_____

How much exercise is your dog presently getting? _____

If you would like your dog to participate in dog daycare, what is the main reason? _____

_____

About Your Dog's Home Life: (please check all that apply)

❒Given free roam of your home when left alone ❒Crate trained ❒Allowed to run free in yard

❒Trained with an invisible fence ❒Leashed walks ❒Unleashed supervised walks

Has your dog ever jumped over a fence? ❒Yes ❒No If yes, how high? _____

This is a Contract between See Spot Run on 21 and the pet owner whose signature appears below (hereinafter called "Owner")

1. Owner agrees to pay the rate for boarding in effect on the date pet is checked out.
2. Owner further agrees to pay all costs and charges for special services requested, and all veterinary costs for the pet during the time said pet is in the care of See Spot Run on 21 (SSR). Grooming prices are given as estimates and may be increased/reduced based on coat condition, special handling needs, additional services requested, and or special requests made. Owner acknowledges that they may be financially responsible for damages caused to SSR property, staff, or facility. SSR is not responsible for damage or loss caused to personal items left with a pet during a stay.
3. Owner further agrees that the pet shall not leave SSR until Owner pays all charges.
4. By signing this Contract and leaving his or her pet with See Spot Run on 21, Owner certifies to the accuracy of all information given about said pet on the New Client Form. Any pet that has a known aggression issue must be under the treatment of a certified behaviorist or veterinarian behaviorist before becoming a new client. Any pet that shows aggression may be refused service for the health and safety of other pets and staff.
5. See Spot Run on 21 shall exercise reasonable care for the pet delivered by the Owner to the facility for boarding, daycare, grooming or training. It is expressly agreed by Owner and SSR that SSR's liability shall in no event exceed the lesser of the current chattel value of a pet of the same species or the sum of $200.00 per animal boarded. The Owner further agrees to be solely responsible for any and all acts or behavior of said pet while it is in the care of SSR.
6. Owner specifically represents that he or she is the sole owner of the pet, free and clear of all liens and encumbrances.
7. Owner specifically represents to SSR that the pet has not been exposed to rabies, distemper or kennel cough within a thirty day period prior to entering SSR. Any pet that shows signs of illness during their stay may be quarantined and/or may be required to seek veterinary treatment before being allowed to return. In addition, pet's nails must be trimmed to a safe length, if not; staff will perform a nail trim at the expense of the Owner.
8. All charges incurred by Owner shall be payable upon pick-up of pet, or when billed by SSR at address listed on file. SSR shall have, and is hereby granted, a lien on the pet for any and all unpaid charges resulting from boarding pet at the kennel. The Owner hereby agrees that in the event the boarding charges are not paid when due in accordance with the contract, SSR may exercise its lien rights upon ten days written notice given by SSR to Owner by certified mail to address shown on file. SSR may evaluate abandoned pets for adoption and re-home as necessary; the Owner specifically waives all statutory or legal rights to the contrary.
9. If pet becomes ill or if the state of the animal's health otherwise requires professional attention, See Spot Run on 21, in its sole discretion, may engage the services of a veterinarian or administer medicine to give other requisite attention of the animal and the expenses thereof shall be paid by the Owner.
10. This Contract contains the entire agreement between the parties. All terms and conditions of this Contract shall be binding on the heirs, administrators, personal representatives and assigns of the Owner and SSR.
11. Any controversy or claim arising out of or relating to this contract, or the breach thereof, or as the result of any claim or controversy involving the alleged negligence by any party of this contract, shall be settled by arbitration in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by an arbitrator may be entered in any Court having jurisdiction thereof. The arbitrator shall, as part of his award, determine an award to the prevailing party of the costs of such arbitration and reasonable attorney's fees of the prevailing party.
12. In any litigation arising out of this contract, the prevailing party shall be entitled to receive reasonable attorney's fees and costs.

Owner Signature: _____ Date: _____