

CLIENT INFORMATION

Owner's Name(s):			
Address:			
City:	Prov:		Postal Code:
Primary Phone #:	Se	econdary Phone #:	
Other Phone #:	0	ther Phone #:	
Email:			
Canadian Anti-Spam Law - Do we and/or reminders: YES	e have consent to con NO	tact you via email,	phone, and send electronic messages
All fees are due at the conclusion	i of your pet's stay		INITIALS:
EMERGENCY CONTACT INFO	DRMATION		
In case of an emergency, I/we we	ould like to be contact	ed before the eme	ergency contacts: 🗌 YES 🗌 NO
Primary Emergency Contact			
Name:	Phone #:	none #: Relationship:	
Secondary Emergency Contact			
Name:	Phone #:		Relationship:
Authorized Person(s) to Pick-up	Your Pet:		
First and Last Name:			Phone #:
First and Last Name:			Phone #:
First and Last Name:			Phone #:
First and Last Name:			Phone #:
How did you hear about us?			



PET INFORMATION

	Pet #1	Pet #2	Pet #3	Pet #4
Name				
Species/Breed				
Sex				
Neutered/Spayed				
Date of Birth				

Name of Current Veterinary Hospital: _____

Name of Veterinarian:

CONDITIONS OF ADMISSION

Centennial Pet Boarding & Grooming is not held responsible for any loss/theft/destruction of any personal property left with the above pet(s).

Print Name: ______ Signature: ______Signature: ______

PHOTO DISCLAIMER

I hereby give Centennial Pet Boarding & Grooming and its affiliates permission to post photos on their website, newsletter and social media pages of any pets under my care. I understand that only the pet's first names will be included in any posts.

Print Name:	Signature:

GROOMING

I would like a scent-free shampoo to be used on my pet: YES NO



RELEASE FOR TREATMENT

In the event that your pet becomes ill or injured while under our care, every effort will be made to contact the above emergency contact(s) for instructions regarding the extent of care. If veterinary care is of an emergency nature or the owner/emergency contact(s) cannot be reached, veterinary care will be provided by Centennial Animal Hospital.

I/we, the owner(s) of the above-mentioned pets, authorize the examination and/or treatment of the abovementioned pet(s) if he/she requires such, up to a value of \$______* while in the care of Centennial Pet Boarding & Grooming. I further agree that I will accept responsibility for expenses incurred should an emergency arise.

Print Name:	Signature:
	*If no dollar amount is written, signing this release authorizes any amount necessary for treatment

I understand that although my pet(s) may be vaccinated against Kennel Cough and/or Upper Respiratory infection, there is a potential to contract this virus while staying here.....

HEALTH

Is your pet under veterinary care for any medical reasons?	YES 🗌 NO

If yes, please explain: ______

Does your pet have any of the following health problems?

Coughing or labored breathing Limping Tiredness/sluggishness Vomiting Seizures
Increased urination
Other:



MEDICATIONS

Pet's Name	Medication	Dosage Times	Instructions

FEEDING

Pet's Name	Type of Food	Amount per Feeding	Times per Day	Allergies



ACTIVITY LEVEL

Has your pet been to a daycare before: YES NO

If yes, please explain, if any, problems or concerns associated with the use of such facility:

Are there any restrictions on your pet's activity that we should be aware of?
What best describes the amount of time your pet spends alone?
Almost never 2-3 hours 3-7 hours 7-8 hours More than 8 hours
If left alone, is your pet confined in:
Kennel Room Not confined at all
Is your pet known to be an escape artist? 🗌 YES 🗌 NO
If yes, please explain (e.g. scales fences, digs under things, able to open latches etc.):
Does your pet have any problems in the following areas?
Barking House training Digging Chewing/destruction Separation Anxiety Jumping/Climbing
Does your pet have any fears? (e.g. people in uniform, men/women, children, thunderstorms, fire, crackers, trains, sirens, fire alarms etc.):

After Hours Drop-Offs and Pick-Ups

I acknowledge that if I wish to pick up my pet(s) after regular opening hours and on holidays, that I must first prearrange a time. I also understand that the door will remain locked, and I will not be permitted to pick-up my pet(s) outside of these hours for the sake of safety.

Print Name: ______ Signature: ______ Signature: ______



2747 Pembina Hwy Winnipeg, MB R3T 2H5 T: 204-261-5928 www.centennialanimalhospital.com/daycare-boarding boardandgroom@centennialanimalhospital.com

Doggie Daycare

Conditions of Admission

The purpose of Centennial Pet Boarding & Grooming Doggie Daycare services is to provide a safe, fun, and stimulating social environment for dogs. To ensure the health and safety of your pet and other clients, we require all owners to comply with the following rules and regulations.

- AGE: Dogs that are 6 months of age and older must be spayed or neutered
- IMMUNIZATION REQUIREMENTS: All dogs must be up to date on their vaccinations. Owners must provide proof from their veterinarian that their dog has received the following vaccinations: DISTEMPER, PARVO VIRUS, RABIES, BORDETELLA (Kennel Cough), within a year. To prevent your dog from contracting kennel cough (the canine equivalent to a cold), we insist that all dogs must be immunized from kennel cough. Despite these precautions, dogs will sometimes acquire a mild bout of kennel cough, which should be brought to our staff's attention. As such, any dog currently infected with kennel cough will not attend daycare until cleared by their veterinarian.
- **HEALTH:** All dogs must be in good health and must not have been ill with a communicable condition in the past 30 days (such as but not limited to; mouth warts and kennel cough). Dogs who have been ill in the past 30 days may be required to show a veterinarian certificate of health to be admitted or re-admitted to the daycare. Owners must notify staff if there are any concerns regarding your dog's health (e.g. if your dog has been lethargic, vomiting, coughing, limping, etc.)
- **BEHAVIOUR:** All dogs must be non-aggressive and not food or toy protective.
- **COLLARS/LEASHES:** All dogs are required to wear a flat buckle collar and have a standard flat leash. All dogs must enter the building behind you only after confirming it is appropriate to enter. All dogs must be controlled and leashed until handed over to a staff member. (No flexi/extendable leashes, choke collars, pinch collars, studded collars, or martingale collars).

I understand that I am solely responsible for any harm caused by or to my dog(s) while my dog(s) is/are attending Centennial Pet Boarding & Grooming.

I agree that Centennial Pet Boarding & Grooming will not be liable for problems, damage, or injury caused by, or to my dogs(s). I hereby release Centennial Pet Boarding & Grooming of any liability of any kind arising from my dog(s) attendance and participation at the daycare.

- I further understand that there are risks of injury or illness when dealing with dogs. Should my pet become ill or injured while in daycare, I hereby authorize examination and treatment by a veterinarian at Centennial Animal Hospital. This generally will be at the expense of the owner.
- I certify that I have read, understood, and agree to abide by the above rules and regulations.