The Canine Country Inn Guest Application

Owner/Pet Information							
Owner/Guardian Name:							
Address:	City: _				State:		_ZIP:
Home Phone:	Work:				Cell: _		
Canine Guest Name:				Age	:	_ Weigh	nt (lbs):
Breed:	_ Color:				Sex:	□ Ma	le 🗆 Female
\square Yes, my dog is spayed/neutered \square No, my dog is NOT spayed/neutered					/neutered		
Veterinarian:					Phone	e:	
Address:	City: _				State:		_ ZIP:
Medications							
☐ No, my pet requires no medicati	on		Yes, my	pet requ	uires med	lication	(Specify below)
Medication Name		D)ose	F	requency		Needs Refridgerated
Feeding							
☐ Client provided food (Brand na	me:)	□ Ca	anine Co	ountry Inn food
AM Feeding					PM Fee	eding	
Quantity:			Quantity	y:			
Special Instructions:			Special	Instruction	ons:		
Emergency Contact							
lame: Cell: Cell:							
Person(s) authorized to pick up/dro	n off doo	ı(s)·					

Canine Behavior						
Is there any person, dog, or situation your dog has issues with?	☐ Yes	□ No				
If yes, please explain:						
Has your dog ever bitten another person or dog?	☐ Yes	□ No				
If yes, please explain:						
Can you take food away without the dog being aggressive?	□ Yes					
□ No						
Are there areas where your dog doesn't like to be touched?	☐ Yes	□ No				
If yes, please explain:						
Has your dog socialized with other groups of dogs?	☐ Yes	□ No				
Are there any restrictions which need placed on your dog's activities?	☐ Yes	□ No				
If yes, please explain:						
Is your dog permitted treats such as dog biscuits and Kong toys?	☐ Yes	□ No				
Anything else we should know about our guest?						
Is your dog currently being treated with flea prevention?	□ Yes	□ No				
Agreement						
I, the undersigned, hereby acknowledge and agree that all information Country Inn "Guest Application" is complete and accurate to the best of acknowledge and agree that I read, understand, and agree to all terms in the Canine Country Inn's "Regulations and Boarding Contract," who with and are fully incorporated into this application. I hereby execute the myself and my heirs, successors, representatives, and assigns. I furt the sole owner or representative of the dog subject to this applicate sufficient to enter into this agreement for and on behalf of any other owners.	of my knowledge and conditional ich I have been ne agreement her attest that ion, that my s	ge. I further is contained en provided for my dog, if I am not signature is				
Owner/Guardian's Signature:	Date:	Date:				
Owner/Guardian's Printed Name:						
Canine Country Inn Representative:	Date:					

The Canine Country Inn Boarding Contract

This is a contract between 'The Canine Cour	ntry Inn' and,
owner of the dog named	, breed
,	grees to exercise due and reasonable care, and to rly enclosed. The dog is to be fed properly and arters.
liability on the kennel's part for loss or dam	ed and cared for by The Canine Country Inn without nage from disease, theft, fire, death, running away, property by said dog, or other unavoidable causes, d.
incurred by owner are payable upon pickup	per dog per day, for boarding services. All charges of their dog(s). Methods of payment accepted will . A \$25 fee will be charged for any returned check.
attention, The Canine Country Inn, in its	he animal's health otherwise requires professional sole discretion, will engage the services of your veterinarian, administer medicine, or give other ses thereof shall be paid by the owner.
-	nn and the dog's owner that all provisions of this parties thereunto for this visit and all subsequent
Owner's Signature:	Date:
Canine Country Inn:	Date: