

Kingdom of Animals Inn & Day Spa

Last Name _____
First Name _____
Address _____

Home # _____
Other #s _____
E-mail _____
Referred by _____
____ Dog ____ Cat ____ Other
Breed _____ Size/Wt. _____
Name _____ M ____ F
____ Neutered
Birthday/Age _____ Color _____
Markings _____

Rate \$ _____ / ____ day ____ week ____ month
_____ \$ _____ location _____
groom \$ _____
____ quiet ____ noisy ____ shy ____ fearful
____ aggressive? Explain _____
____ animals ____ people ____ bite ____ escapist
____ digger ____ jump
Vaccinations:
____ boosters ____ rabies ____ feline leuk
Medications _____
____ Bring Meds? _____
Diet _____
____ 1X ____ 2X ____ 3X ____ Canned ____ Dry
Special Instructions _____

Groom: ____ easy ____ fair ____ difficult ____ bite

Emergency #s/Contact _____

Vet _____ Phone # _____ Friend _____

Bringing:

____ lead ____ cage ____ carrier ____ toys ____ bedding ____ food ____ other _____

I certify that I am the owner of this pet.

I hereby grant permission to this boarding establishment to act in my behalf, and in my pet's best interest, by obtaining veterinary care at my expense, if deemed necessary, for illness or injury. I further agree to pay for all veterinary and other necessary services incurred by and for my pet during its stay in this facility.

This boarding facility agrees to exercise all due and reasonable care to prevent injury or illness to my pet. However, in the event of illness or injury, the owners and employees of this boarding facility shall not be held personally liable for such injury or illness.

I agree to pay all costs for any property damage or personal injury caused by my pet during its stay. I agree to pay all charges on the day of pick-up of my pet and I understand that my pet may not leave the premises until all charges are paid in full. I understand that any animal left for ten days beyond the agreed date of pick-up may be sold or disposed of at the discretion of the kennel owner.

Sign: _____ Date: _____