



DOGGIE PROFILE

Human's Information

Name _____

Address _____ City _____ Zip _____

Phone (H) _____ (W) _____ (C) _____

Email (so we can send you pictures, coupons, etc.) _____

Where did you hear about us? _____

Emergency Contact Information (someone other than yourself or traveling companions)

Name _____ Phone _____

Vet's name _____ Phone _____

Dog Profile

Dog's Name _____ Sex _____ Spayed/Neutered _____

Breed _____ DOB _____ Weight _____ Color _____

Does your dog have any allergies? _____

Does your dog have any health problems that require special attention? _____

Does your dog take any medication? **Y** **N** If yes, for what? _____

Does your dog have any sensitive areas on the body? **Y** **N** If yes, where? _____

How does your dog react to strangers? _____

Are there any type of people your dog automatically dislikes or fears? _____

Is your dog frightened by any noises? _____

How does your dog react to puppies? _____

Has your dog ever biten anyone? **Y** **N** If yes, what were the circumstances? _____

Has your dog ever jumped over a fence? **Y** **N** If yes, how high was it? _____

Does your dog have a problem in any of the following areas? (check all that apply)

- | | | | | |
|-------------------------------------|---|---|--|--|
| <input type="checkbox"/> Jumping | <input type="checkbox"/> Excessive Barking | <input type="checkbox"/> Eating Foreign Objects | <input type="checkbox"/> Leash Aggression | <input type="checkbox"/> Growling/Biting |
| <input type="checkbox"/> Aggression | <input type="checkbox"/> Separation Anxiety | <input type="checkbox"/> Being Crated | <input type="checkbox"/> Food/Toy Aggression | <input type="checkbox"/> Escaping |

All Aboard Port Jeff - Liability Agreement

This agreement shall be enforced from the date signed and for all visits thereafter to All Aboard Port Jeff.

I, _____ hereby certify that my dog(s) _____ is/are in good health and have not been ill with any communicable diseases the last 30 days, and that my dog (s) has/have current vaccinations for rabies, distemper, parvo virus, para influenza and bordetella. Dogs arriving with fleas and/or ticks may be treated with flea/tick preventative at ALL ABOARD Port Jefferson's discretion, at my expense. I further certify that my dog(s) has/have not harmed or shown aggression or intimidating behavior towards any person or any other dog except as disclosed under part 6(a) and (b) of this agreement. I give authorization to ALL ABOARD Port Jefferson to speak with my veterinarian and/or their staff to confirm my dog(s) vaccination status, date of surgical alterations and medical history.

I have read and understand the following:

1. ALL ABOARD Port Jefferson is an open play environment and because dogs "pack instinct" can at times be unpredictable, there are inherent risks, which even when closely monitored, may result in the following: 1) transfer of communicable illnesses such as, but not limited to, Bordetella virus ("kennel cough") and 2) injuries such as, but limited to, broken nails, sore pads, abrasions, lacerations, punctures and/or cuts, etc.
2. ALL ABOARD Port Jefferson and their staff shall not be liable for any injury or damage to any person or persons, animals or to any property, however caused, which results from the training, behavior, care or grooming of my pet as from any negligence on the part of any other pet owner attending ALL ABOARD Port Jefferson. I further agree that ALL ABOARD Port Jefferson shall not be liable for any costs, attorney's fees or expenses incurred in connection with claim, or proceeding occurring as a result of my pet's participation at ALL ABOARD Port Jefferson.
3. ALL ABOARD Port Jefferson reserves the right to administer aid and/or use any available veterinarian for my pet if the need arises, whether or not ALL ABOARD Port Jefferson can reach me or my emergency contact. I assume full financial responsibility for any and all veterinary expenses incurred, in addition to other fees incurred for services provided at or by ALL ABOARD Port Jefferson.
4. I agree to pay the rate for service in effect on the day my dog(s) attend(s) ALL ABOARD Port Jefferson. Prices are subject to change at any time. No dog will be released until all charges are paid in full. I understand the deposit and non-refundable fee policies.
5. I am solely responsible for any harm and/or damage caused by dog(s) to persons, property or to other pets, while my dog(s) is/are attending ALL ABOARD Port Jefferson. ALL ABOARD Port Jefferson reserves the right to refuse service or admittance to any dog. Costs for repairs to property will be my sole responsibility.
6. (a) I agree that I have given full disclosure of any history of aggressive behavior by my dog, and understanding that failure to do so will result in my dismissal from ALL ABOARD Port Jefferson and no refund shall be given. (b) My dog's behavior now and in the future is solely my responsibility. Should any behavior on the dog's part now or in the future result in damage to the property, owners, or persons of a third party, I agree to assume full liability for any and all such damage, and to absolve ALL ABOARD Port Jefferson from any and all obligation to pay such damage.
7. I understand that the hours of operation are from 6am to 8pm Monday through Friday, 8am to 5pm Saturdays, and 11am to 1pm Sundays. Dogs not picked up by closing will be subject to additional boarding charges and will be released the next business day unless arrangements with ALL ABOARD Port Jefferson are made to the contrary.
8. Should I or my pre-approved agent fail to contact ALL ABOARD Port Jefferson within 48 hours of the arranged pick-up time, my pet may be considered to be abandoned. Any expenses incurred for the transport, overnight care and/or placement or adoption of said pet shall be paid by me, in addition to other fees incurred for services provided by, at, or through ALL ABOARD Port Jefferson. I hereby grant a lien on said pet for any and all unpaid charges resulting from services provided by, at or through ALL ABOARD Port Jefferson.
9. I agree that my pet(s) may be videotaped, photographed and/or recorded. ALL ABOARD Port Jefferson shall retain the exclusive rights to the results and all proceeds of such taping, photographs and recordings with the rights throughout the world, an unlimited number of times in perpetuity, to copyright, to use and to license others in any manner.

I certify I have read, understand and agree to the policies, conditions and statements of this agreement:

Name of Owner _____ Date _____

Signature of Owner _____