

# TAIL COMMAND

## PET REGISTRATION AND RELEASE FORM

### OWNER(S) INFORMATION

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
Email: \_\_\_\_\_@\_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

### ALTERNATE PERMISSION CONTACT INFORMATION

Name(s): \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

### DOG PROFILE INFORMATION

Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
Sex: \_\_\_\_\_ Neutered / Spayed Weight: \_\_\_\_\_ Lbs. Color: \_\_\_\_\_  
Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
How long have you had him/her? \_\_\_\_\_  
Where did you get him/her? \_\_\_\_\_

Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
Sex: \_\_\_\_\_ Neutered / Spayed Weight: \_\_\_\_\_ Lbs. Color: \_\_\_\_\_  
Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
How long have you had him/her? \_\_\_\_\_  
Where did you get him/her? \_\_\_\_\_

Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
Sex: \_\_\_\_\_ Neutered / Spayed Weight: \_\_\_\_\_ Lbs. Color: \_\_\_\_\_  
Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
How long have you had him/her? \_\_\_\_\_  
Where did you get him/her? \_\_\_\_\_

### VET INFORMATION

Vet Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

## How did you hear about us?

### DOG PROFILE INFORMATION

Has your dog been around any other social environments?

YES / NO

Has your dog(s) ever bit or snapped other than playfulness?

*(We do not discriminate; however, we do like to know the situation and would like to know what to prepare for in advanced.)* YES / NO

Are there any known behavioral problems with food, toys, other pets, etc?

---

---

---

Is your dog an escape artist? If yes, please explain. YES / NO

---

---

Is there anything that may frighten your pet: (loud noises, strangers)

---

Does your dog(s) have any known medical, health, physical conditions or allergies that we should be aware about? YES / NO

Please Describe: \_\_\_\_\_

---

What heartworm/flea/tick prevention does your dog use?

\_\_\_\_\_ Last date preventative administered: \_\_\_\_\_

Any sensitive areas on your dog(s) body? Yes / No

If yes, where: \_\_\_\_\_

Please give us a general introduction of your dog(s):

*Example included; behaviors with new people and dogs*

---

---

---

---

---

---

---

# TAIL COMMAND PET SERVICE AGREEMENT

The welfare and safety of your pet(s) is of our utmost importance when staying with Tail Command, LLC. If a medical emergency should arise while in the care under our hands, it is crucial that we are able to provide medical treatment quickly.

Upon any medical emergency, Tail Command will first contact the owner(s) of the pet(s). If an owner is unable to be reached, we will then contact the emergency contact persons listed. In the event that Tail Command is unable to reach any contacts, we will then contact the nearest pet clinic for medical attention as quickly as possible. For these reasons, it is required that we have all parents sign this form.

I, \_\_\_\_\_ **grant Tail Command, LLC and it's employee(s) full power of decision concerning the well-being of my pet(s).**

I understand in the event of a medical emergency, Tail Command at its sole discretion and what deems necessary will seek immediate attention of a licensed veterinarian. I hereby authorize Tail Command to seek the medical attention for my pet(s) from a licensed veterinarian. I further comply that I am financially responsible for any and all medical treatment upon arrival or departure my pet(s) receives as a result of the medical emergency while attending Tail Command.

*Tail Command may at any time exercise contact to your veterinary clinic for your pet(s) information, vaccination updates, care, etc. By signing I have read, acknowledge, and understand this arrangement and give us authorization to your veterinarian records.*

**Also in consideration for the services provided by Tail Command, LLC, I agree to the following:**

- 1. I certify that my dog is in good health and has not been ill with any communicable condition in the last 30 days.** I further certify that my dog has neither harmed any person or any other dog unless otherwise noted. I understand that in agreeing to admit my dog for services, Tail Command LLC and it's staff have relied on my representation regarding my dog's health and behavior together with all information provided in this agreement and any other supplemental documentation.
- 2. I understand and agree that I am fully responsible for any and all harm, damage, and/or injury caused to my dog, and also including injury/damage to any people and/or property.**
3. I understand that Tail Command LLC will exercise all due diligence and care in guardianship of my dog(s). I hereby waive and release Tail Command LLC and its employees, volunteers, and agents from liability of any nature for injury or damage and I expressly assume the risk or damage while my dog(s) is/are in the care of Tail Command LLC.

4. **I understand that Tail Command is an interactive play setting and is not without risk of some injury.** I authorize Tail Command LLC, in its best judgment, to make appropriate decisions regarding situations that may develop.  
*Please keep in mind that dogs play with their teeth and claws and due to dogs playing like this we cannot accept or take responsibility for any injuries. (It is imperative to understand puppies have razor sharp teeth, and that some breeds are more prone to injury due to activity level, tighter and thin skin, and short hair.*
5. Tail Command LLC reserves the right to refuse admittance of any dogs and to terminate any service agreement at any time in its sole discretion.
6. I agree that the many benefits of dog socialization (including day care and boarding dogs together) outweigh the risks, and I specifically request a socialized environment for my dog while attending Tail Command LLC.
7. I agree to pay all cost for day care, night day care, or grooming/bathing upon pickup of my dog(s). I further agree to pay all cost or charges for all services needed, including but not limited to any and all vet costs associated with the pet visit duration at Tail Command, LLC.
8. I have received, read, understand, and agree to the terms outlined above and on Tail Command's policy and registration forms.
9. I agree to indemnify and save harmless Tail Command LLC, its employees, owners, volunteers, and agents from any lost property, loss or damage of any kind incurred by my dog(s). This includes Reviews on the Internet.
10. By signing and leaving pet, owner certifies that all information given information regarding their pet is accurate, true, and to the best of their knowledge.
11. I warrant that I have the authority to represent all owners of this dog in signing this contract.
12. **Abandonment/Release:** If your pet(s) are not called for within 30 days after the designated time, the animal(s) may be placed for adoption/release at Tail Command's discretion with or without an adoption fee. Advance notice in writing of any such adoption will be sent by registered mail to the owner at the address given hereon, and no further notice shall be deemed necessary.
13. I grant Tail Command, its representatives and employees the right to take photographs of my pet and to copyright, use and publish the same in print and/or electronically. I agree that Tail Command may use such photographs of my pet with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, **advertising**, and Web content.

---

Printed Name(s) of Owner(s)

Date

---

Signature of Owner(s)

Printed Name(s) of Pet(s)

## **Service Agreement Terms (Layman Terms)**

*In layman terms, the service agreement is that we are providing care for your dog, however dogs play with their teeth and claws and accidents/fights do occur and unfortunately, we cannot accept responsibility of injuries/bites/puncture wounds, etc, but only provide the best environment for socialization. We understand you may become upset with any pain your dog may incur while here. Please keep in mind that we are upset too and not in business to have dogs hurt. We try to do as much as we can without having to make you incur a vet bill, please understand that things do happen and by posting a review of a dog bite/injury you are breaking this policy. We understand leaving a bad review that is fair, but we obviously cannot predict dog fights at any moment. We ask that you be a rational human being and understand those circumstances.*

*Also, just because your dog has its vaccinations, it does not mean there can't be a carrier to the viruses and your dog could potentially be more susceptible to these risks. Understanding that, please keep in mind you can go get the flu shot and yet still get the flu. It's the same concept. We do understand to keep our facility as clean as physically possible and disinfect daily to keep germs out, but we unfortunately, like any other veterinarian, dog kennel, or day care cannot be 100%, we can only do the best of our ability and in the end, you understand that socialization do far outweigh the risks associated.*

**Please send vet records to:**

**FAX: 217-529-9247 / [support@tailcommand.com](mailto:support@tailcommand.com)**

## **REQUIREMENTS:**

### **Employee Use**

- Fixed (if over 6 months of age)**
- Rabies**
- Distemper/Parvo**
- Bordetella (Kennel Cough)**
- Service Agreement**

---

**(Intake Initial and Dates)**