

TAIL COMMAND

Pet Registration and Release Form

Please write legible for emergency and feeding information!

OWNER INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ @ _____

Cell Phone (____) _____ - _____ Work Phone (____) _____ - _____

Alternate Owner Information

Name: _____ Cell Phone: (____) _____ - _____

Emergency Contact Information:

Name: _____ Phone: (____) _____ - _____

Other people authorized to pick up your pet(s):

How did you hear about us? (Please Circle One)

Google

Family/Friend

Existing Customer

Other: _____

DOG PROFILE INFORMATION

Name: _____ Breed: _____

Sex: _____ Neutered / Spayed Weight: _____ Lbs. Color: _____

Birthday: _____ / _____ / _____

Where did you get him/her? _____

How long have you had him/her? _____

FEEDING INFORMATION:

Brand of Food to be used: _____

MORNING: _____ Cup / Bag / Bowl / Can / Scoop

Special Instructions: _____

NIGHT: _____ Cup / Bag / Bowl / Can / Scoop

Special Instructions: _____

VET INFORMATION

Vet Name: _____

City: _____ State: _____ Phone: (____) _____ - _____

Email: _____ @ _____

(Email is used for communication for vet records after established)

Does your dog have any medical/physical/health conditions, or allergies we should be aware about? If yes, please describe below. **YES** **NO**

What heartworm and flea-tick prevention does your dog use?

DOG PROFILE INFORMATION

Has your dog(s) ever bit or snapped other than playfulness? YES / NO

Is there anything that may frighten your pet? YES / NO

Is your dog an escape artist? YES / NO

Any known behavioral problems with food, toys, other pets, etc.? YES / NO

Any sensitive areas on your dog's body? YES / NO

If yes to any questions above, please explain...

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

Example included: behaviors with new people and dogs

Has your dog been around any other dog social environments? YES / NO

If you have multiple dogs, please print pages 2 and 3 for each additional pet.

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.

Emergency Veterinary Authorization & Financial Responsibility

In the event of medical emergency, The owner hereby grants Tail Command LLC and its employees full authority to approve any and all emergency medical treatment deemed necessary by a licensed veterinarian or emergency animal clinic, including but not limited to examinations, diagnostics, medications, stabilization, and/or any procedures, surgery, and hospitalization, if recommended by the attending veterinarian/emergency animal clinic due to the severity of the pet's condition.

The owner agrees to assume full financial responsibility for ANY and ALL veterinary services rendered.

_____ **(Initial)** The owner acknowledges that in urgent or life-threatening situations, immediate decisions may be required and may be made without prior consultation.

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

Emergency Spending Authorization (Owner Selection Required)

In the event the owner or emergency contact cannot be reached, Tail Command LLC is authorized to approve veterinary care up to the following amount:

- \$500
- \$1,000
- \$2,500
- \$5,000
- No Limit – provide any necessary life-saving care
- Other: \$_____

_____ **(Initial)** The owner understands that this amount is an authorization limit and not a cost estimate. Every reasonable effort will be made to contact the owner or emergency contact prior to and when exceeding this amount unless immediate care is required to prevent suffering or loss of life.

_____ **(Initial)** If emergency treatment exceeds the selected limit and the owner cannot be reached, Tail Command LLC is authorized to follow the recommendations of the attending veterinarian in the best interest of the pet, including life-saving measures or humane euthanasia if deemed medically necessary.

This just tells us how far we can go in an emergency if we can't reach you--so we don't lose time at the vet.

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 its 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. Owner acknowledges responsibility to provide **reachable contact information at ALL times** and to notify Tail Command LLC of travel or unavailability.
4. 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 having 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. **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.
9. 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.
10. I have received, read, understand, and agree to the terms outlined above and on Tail Command's policy and registration forms.
11. 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.
12. 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.
13. I warrant that I have the authority to represent all owners of this/these dog(s) in signing this contract.

Signature of Owner(s)

Printed Name(s) of Owner(s)

Name of Pet(s)

Date

Service Agreement Terms (Layman Terms – Basically)

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. So 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/covid shot and yet can still get the flu/covid. It's the same concept. We do 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 veterinarian / proof of vaccinations to:

FAX: 217-529-9247

EMAIL: support@tailcommand.com

Employee Use

REQUIREMENTS CHECKLIST

- Fixed (if over 6 months of age)
- Rabies
- Distemper/Parvo
- Bordetella (Kennel Cough)
- How did you hear about us?

(Intake Initial and Dates)

_____/_____/_____
