REGISTRATION FORM

6883 Private Road 5150, Celina, Texas, 75009 * 972-382-2125 * cottagehillcaninecountryclub.com

CLIENT INFORMATION _____ Phone: _____ Email: _____ Name: ____ Address: ___ Second Owner: ______ Phone: ______ Emergency Contact:______ Phone: ______ PET INFORMATION Dog's Name: ______ DOB: _____ Sex: Male Female Weight: _____ Color: _____ Microchip #:_____ Feeding Instructions:____ My pet can have an occasional treat (may include peanut butter): YES NΘ Does your dog have allergies or any medical conditions? YES NO If YES, please detail: ______ Does you dog have any physical limitations?_____ Can your dog swim in the pool during summer activities? YES NO Has your dog been exposed to other pets outside your home? YES NO Has your dog been crate trained? YES NO Describe your dogs' behavior/temperament ______ Anything else you'd like us to know about your dog?_____ CHCCC has permission to take pictures of my pet: YES NO CHCCC has permission to use my pet's photo on their website & social media platform: YES NO Pets Veterinarian:_____ Phone: _____ Veterinarian Address:_____ REQUIRED VACCINATONS (must provide proof of vaccinations) Rabies [Date]:___-__ DHPP (Distemper/Hepatitis/Parainfluenza/Parvovirus) [Date]:__--__-Bordetella [Date]:___-__ Heartworm [Date]:__-__ Flea & Tick [Date]:__-___

(All dogs must be current on all vaccines to participate at CHCCC)

Neutered/Spayed [Date]:___-__ (Dogs 6 months of age must be Neutered/Spayed)

Your veterinarian can email vaccine records to marilyn@cottagehillcaninecountryclub.com

CONTRACT DISCLAIMER

This is a Contract & Disclaimer between Cottage Hill Canine Country Club and the pet owner whose signature appears below. Please read and initial in each space below. Owner agrees to pay the rate for daycare/boarding in effect on the date the pet is checked into CHCCC (as posted in the office). Owner further agrees that the pet shall not leave CHCCC until all charges are paid to CHCCC by Owner. By signing this contract and leaving the pet with CHCCC, Owner certifies to the accuracy of all_ information given about said pet, and that the pet is in good health. The Owner understands when older pets are boarded, they are placed under a great deal of stress because of removal from their normal home environment. This stress can cause latent (dormant) physical conditions (such as heart, liver and kidney disorders) to become active. This can result in illness or death of said animal. Owner specifically represents to CHCCC that the pet has not been exposed to rabies, distemper, parvo virus, feline leukemia or other contagious diseases (parasites/giardia) within a thirty- day period prior to Owner specifically represents that he or she is the sole owner of the pet, free and clear of all liens_ and encumbrances. _All charges incurred by Owner shall be payable upon pick-up of pet, or when billed by CHCCC at the address listed on Contract. CHCCC shall have, and is hereby granted, a lien on the pet for any and all unpaid charges resulting from boarding the pet at CHCCC. If Owner does not pick up the pet within 5 calendar days after the day the pet was due to be picked up, the pet shall be deemed to be abandoned. The person into whose custody the pet was placed for care shall first try for a period of not less than 10 days to find a new owner for the pet, and, if unable to place the pet with a new owner, shall thereafter be transported to a local no kill shelter for care. lf the pet becomes ill or if the state of the pet's health otherwise requires professional attention, CHCCC, in its sole discretion, may engage the services of a veterinarian or administer medicine or give other requisite attention to the pet, and the expense thereof shall be paid by Owner. The Owner understands that bringing the pet into daycare/boarding puts them in a situation that. may be physically risky even when they are handled with the utmost care. This Contract contains the entire agreement between the parties. All terms and conditions of the Contract shall be binding on the heirs, administrators, personal representatives and assigns of Owner and CHCCC. _CHCCC books reservations on a first come first serve basis. If your dog cannot attend daycare or boarding on their scheduled day, we ask for 24 hours of notification. ___For your dog's safety, please make sure your pet enters and exits the facility on a leash & collar. _CHCCC reserves the right to excuse any dog, for any reason, from the daycare/boarding. _If the Owner chooses to bring toys, bedding or any item that might make your pet feel more at

PET OWNER SIGNATURE	DATE	
PET OWNER NAME (PRINTED)		

home, we ask that you write your pet's name on all items. The Owner understands the risk that personal property could be damaged and CHCCC will not be responsible for replacement of personal belongings.

CONTRACT DISCLAIMER & MEDICAL RELEASE FORM

	ease Form between Cottage Hill Canine Country Club s below. Please read and initial in each space below.
	gh all dogs are fully supervised, incidents of injuries which includes but not limited to bites, scrapes,
•	l contact cannot pick up my dog(s) at the agreed vide overnight and daycare services at my expense.
• • • •	the boarding morning time slot, but cannot e-up time slot, that I will incur an added charge
CHCCC Saturday Hours 8am-12pm. in or pick-ups. No daycare on Saturdays.	We are only open for prescheduled boarding check
•	be caring for boarded pets, but our facility will be not accept drop-off or pick-ups on Sunday.
thereof, or as the result of any claim or c party to this Contract, shall be settled by American Arbitrations Association, and ju may be entered in any Court having juris	t of or relating to this Contract, or the breach controversy involving the alleged negligence by any arbitration in accordance with the rules of the adgement upon the award rendered by an arbitrator diction thereof. The arbitrator shall, as part of this ling party of the costs of such arbitration and ng party.
I, ackr	nowledge that my dog does not have any
contagious disease or infection as of (tod	ay's date) If ant prior to entering the facility, I release all liability
Signature of Owner	DATE
Printed Name	
MEDICAL	RELEASE FORM
discretion, deems to need the immediate CHCCC to seek medical attention at the o	of a medical emergency that CHCCC, at its sole attention of a licensed veterinarian, I authorize closest available veterinary facility. I further agree medical treatment my pet(s) receives as a result of vices provided by CHCCC.
Signature of Owner	DATE
Printed Name	

ACT H.B. 2063

Under Act H.B. 2063, kennel facility operators (those who are providing boarding services, etc.) for more than three dogs, to provide written notice to dog owners if their pet will be left unattended and without a fire sprinkler system.

l, conse	nt that my dog can be in Cottage
Hill Canine Country Club's care without an employ specified below:	yee present during the hours
During the nighttime boarding hours: 8pm-6am	
During mealtime: 7am-8am and 5pm-6pm	
During the mid-day rest period: 1pm-3pm	
*All times are subject to change (weather condition	ons, daylight saving time, etc.)
Dogʻs Name	
Dog Owner's Signature	
Date	