

CWD DOG RESORT

1. Dog's Name _____ Male () Female ()

Breed _____ Weight _____ Color _____ Neutered/Spayed Yes () No ()

Birthdate (year) _____ Microchip # _____

2. Dog's Name _____ Male () Female ()

Breed _____ Weight _____ Color _____ Neutered/Spayed Yes () No ()

Birthdate (year) _____ Microchip # _____

3. Dog's Name _____ Male () Female ()

Breed _____ Weight _____ Color _____ Neutered/Spayed Yes () No ()

Birthdate (year) _____ Microchip # _____

Owners Information

Name: _____

Address: _____

City: _____ Postal Code _____

Cell# _____ Home# _____ Work# _____

Email: _____

Individuals who have your permission to pick up your dog's from CWD Dog Resort
Once dogs are released into the care of authorized individuals CWD Dog Resort is no longer
responsible for your pet.

Authorized Individuals

Name: _____ Ph # _____

Name: _____ Ph # _____

Emergency Contact Information

Please print names

Emergency Contact Name: _____

Cell # _____ Home # _____ Work # _____

Primary Veterinary Clinic _____

Clinic Address: _____

Clinic Phone: _____

Please Bring Your Own Dog Food

Feeding Times _____

Amount of food _____

Allergies? _____

Physical Limitations or Health Problems

- Does your dog get along well with other dogs or animals? Yes () No ()
- Is your dog aggressive towards people Yes () No ()
- Does your dog bite. Yes () No ()
- Special commands you would like us to use? _____

Dogs require up to date vaccinations

- DHLPP
- Bordetella (Kennel Cough)
- Rabies

If you have questions about vaccines your dog has or needs, please call your vet and ask them.

Please send or bring a copy of your dogs vaccination records, or call your vet and have them forward the records to cottoncandycorner@gmail.com

Dogs Require Flee & Tic Application

- Bring Proof of Purchase of
- Revolution
- Frontline
- K9 Advantix II
- NexGard or Simpirica (chewable).

These are the ONLY brands accepted as other brands do not cover all 3 external parasites. (Advantage Multi does NOT kill ticks and Bravecto does NOT kill lice).

We also highly recommend de-worming your dog at least 2 times/year (Spring/Fall).

- Dogs that are currently ill, will not be allowed to come to CWD Dog Resort
- Dogs who have recovered from a communicable illness within the past 30 days must provide veterinary clearance to return to CWD Dog Resort.
- CWD Dog Resort reserves the right to seek veterinary care for your dog at its discretion.
- If your dog incurs veterinary bills during their stay at CWD Dog Resort dog boarding, you the legal owner of the animal must pay those bills at time of pickup.
- Owners certify by signing this application that their dog is in good health.
- We are not accepting dogs in heat at this time.
- We reserve the right to refuse any dog for any reason at any time.
- Abandoned dogs **Contractual Terms:** While the 4-day rule applies. An animal is deemed abandoned if it is not picked up within 4 days after the agreed-upon date. Under the *BC Prevention of Cruelty to Animals Act* (PCAA), if an authorized agent (such as a SPCA constable) deems an animal abandoned, they may take custody of it.

Waiver and Agreement

1. I hereby represent that I am the legal owner of the dog(s) described above to use the services provided by **CWD Dog Resort**
2. I hereby waive and release **CWD Dog Resort** owners Calvin & Wendy Bakos and it's employees from any and all liability which my dog(s) may suffer, including specifically, but not without limitation, any injury or damage whatsoever arising from the dog(s) attendance and participation of services provided by **CWD Dog Resort**
3. I hereby agree to indemnify and hold harmless **CWD Dog Resort** and it's employees from any and all claims by any member of my family or any other person accompanying me to a function of daycare/boarding or while attending the premises there of and as a result of any action by any dog.
4. I hereby represent that my dog(s) in good health and has not been ill with any known contagious diseases within the past 30 days.
5. I recognize that the health of the dog(s) is the owner's responsibility. I hereby represent that all required vaccinations DHLPP, rabies, bordetella, distemper and parvovirus are up to date. I will also continue to ensure that the required vaccinations will be kept up to date for as long as my dog(s) attends daycare/boarding. In addition, I hereby represent that my dogs have flea/tick preventative treatments applied regularly.
6. I further understand and agree that **CWD Dog Resort** dog boarding and their caregivers will not be held liable for any problems that might develop with my dog(s) including, but not limited to sickness, disease, injury, running away and death, provided that reasonable care and precautions are followed.
7. I understand and agree that any problem that develops with my dog(s) will be treated as deemed best by the care-givers of **CWD Dog Resort** dog boarding at their sole discretion and that I assume full financial responsibility for any and all expenses incurred.
8. Daycare / Boarding fees and packages are non-refundable and non-transferable.
9. **CWD Dog Resort** dog boarding reserves the right to permanently remove a dog from care at any time to ensure the safety of other dogs as well as staff.
10. I agree my dog(s) are not aggressive and I do not have a chance of being bit by your dog.
11. I understand that the rules above apply to any dog(s) of mine attending daycare/boarding.
12. I am agree that my dog(s) may be videotaped and/or photographed and the footage can be used for promotional purposes: Yes () No ()

PLEASE PAY BY CASH \$

A Non Refundable deposit required at time of reservation for longer stays is required to reserve your spot.

Drop-off day/time: _____

Pick-up day/time: _____

Date: _____

Name Please Print _____

Signature: _____

