

Boarding & Playcare

Client Name:	E-mail:		
Cell Phone: Other Parent (Name & Phone)			
Address	City	CityPostal Code	
<u>PET INFO</u>			
Dog's Name:	Breed:	M/F	Spay/Neut.
birthdate	Vet/ Clinic		
Health issues/ medications: _			
Behavior Issues/ special need	s:		
Does your dog have food alle	rgies?		
Feeding instructions: (Cups p	er meal)		
PLEASE ANSWER THE FOLLOW			
Is your dog aggressive with o	ther dogs? No, Yes- please explain:		
Has your dog been aggressive	e with people? No, Yes- Please explain:		
How does dog react when sh	e is in a kennel?		
What is your dogs exercise ro	outine?		
Is your dog allowed to be wal	ked off leash on an unfenced portion of the	property while in our c	are? Y/N Intl
In the event of an injury, do y	ou authorize KCA to take your dog to your v	et at the owner's exper	nse? Y/N Intl
Kootenay Canine Adventures	is not responsible for lost or damaged toys, $% \left\{ \left\{ 1\right\} \right\} =\left\{ 1\right\} $	bedding or any other It	ems. Intl
You have provided KCA with	a copy of up to date vaccine information Intl		
Anything else we should know	w?		
Emergency Contact-If we can	't reach you while you're away, who can we	call?	
Name	Contact		
	nd the above questions and hereby state that In good health without illness or injury upon o		
Owner Signature	Date:		