

Registration Form

Moonhaw Kennels, LLC
165 Hite Road, Warnerville, NY 12187
516-974-5645

Owner's Name (Please Print) _____

Owner's Address _____

Street Town Zip

Home Telephone _____ Emergency Telephone _____

Veterinarian _____ Are vaccinations up to date? Y N

Pet's Name(s) _____ Breed _____ Color _____ Sex M F Age _____

Boarding Agreement-

Should any Boarder become ill, or seem to be in need of medical attention, we will make every effort to contact the owner. However, we reserve the right to administer aid and/or contact the veterinarian named above. If said veterinarian is not available, we will use another available veterinarian. I/we, the owner(s), agree to pay any and all related charges.

I/we agree to pay the daily boarding rate taking into consideration the stated drop-off and pick-up times. If the dog(s) is/are picked up by 10 a.m. there is no charge for that day. There will be no charge for the day for dogs dropped off between 5 and 6 p.m.

The Owner agrees to notify the kennel in advance if there is any change in the date and/or time the Boarder is to be picked up. No Boarder will be released until all charges are paid in full. It is understood that any dog(s) not picked up and/or for which appropriate kennel fees are not paid shall be turned over to appropriate authorities as abandoned seven (7) days after the scheduled date of pick-up and the Owner shall remain liable for the complete boarding bill as well as all other charges incurred in the care, maintenance, and handling of said animal. The owner of the animal agrees to pay for reasonable attorney's fees incurred by the above named boarding facility in the collection of any charges relating to care, maintenance, and/or disposal of the Boarder.

Dog owner(s) understands the risk of his/her dog(s) contracting an illness while being boarded at this facility and holds the facility and its operator harmless in such situations. I/we have had the opportunity to inspect the facility and discuss its management with the operator and both meet with my/our satisfaction.

Special Boarding Instructions _____

Feeding Instructions _____

Behavioral Issues _____

Signed _____ Date _____ / _____ / _____

Use reverse side if more space is needed