

Client Registration, Daycare & Boarding Agreement 3602 Elida Rd., Lima, OH 45807

1. Pet Owner Information

Owner N	ame:	
Address:		
City/Stat	e/Zip:	
Primary	Phone:	
Secondai	y Phone:	
Emaii:		
Emergency Contact (not traveling with you): Name/Phone: t Information		
Name:	Species/Breed:	
Age:	Sex: □ M □ F Spayed/Neutered: □ Yes □ No	
Color/Ma	rkings:	
Microchij	o #:	
Known al	lergies:	
Medical d	conditions:	
viedicalio	ons & instructions:	
Feeding i	nstructions:	
Behavior	nstructions:notes (fears, quirks, triggers):	
(if appl	icable)	
Name:	Species/Breed:	
Age: Sex: □ M □ F Spayed/Neutered: □ Yes □ No		
	Sex. — IVI — I Spayea/Teacerea. — I es — IVo	
Age. Color/Ma	rkings:	
Color/Ma	rkings:	
Color/Ma Microchi _l	o #:	
Color/Ma Microchi _l Known al	o #: lergies:	
Color/Ma Microchi _l Known al Medical c	o#:elergies:eonditions:	
Color/Ma Microchi _l Known al Medical c Medicatio	o #: lergies:	

3. Veterinary Information

• Primary Veterinarian/Clinic:	
• Phone:	
• Address:	
equired Vaccinations (attach proof):	
• Rabies – Date:	
• Distemper/Parvo – Date:	
Bordetella – Date:	
• Canine Influenza (recommended) – Date:	
. Daycare & Boarding Preferences	
 Services Requested: □ Daycare □ Boarding □ Both 	
• Play Style: ☐ Group Play ☐ Solo Play Only ☐ Staff-guided play	
• Feeding: ☐ Owner-provided food ☐ House food (additional fee) Amount/	Frequency:
• Belongings Brought: □ Leash □ Collar □ Bed □ Toys □ Food □ Treats	Other:

5. Terms & Conditions

A. Health Requirements

- Pets must be current on Rabies, Distemper/Parvo, and Bordetella.
- Pets must be free of contagious illness, fleas, and parasites.
- If fleas/parasites are found, treatment will be administered at the owner's expense.
- Owner agrees to disclose all medical and behavioral conditions.

B. Behavior & Safety

- Flying Fur Pets may refuse service for aggression, stress, or safety concerns.
- Pets may be separated or kenneled for safety or rest.
- Dogs play physically; minor injuries may occur.

C. Group Play Participation

If the owner selects group play:

- Dogs may wrestle, chase, nip, and interact physically.
- Staff supervise but cannot prevent all incidents.
- Owner accepts all risks associated with group play.

D. Boarding Policies

- Pets may be kenneled or crated for rest, feeding, or overnight.
- Accurate feeding and medication instructions must be provided.
- Late pickups may incur fees.
- Pets not picked up within 7 days of scheduled pickup may be considered abandoned under Ohio law.

E. Personal Items

 Owners may bring personal items, but Flying Fur Pets is not responsible for loss or damage.

F. Payment Terms

- All fees are due at pickup.
- Owner agrees to pay for damages caused by their pet.
- Additional fees may apply for late pickup, holidays, medication administration, or special handling.

G. Emergency Veterinary Care

- Staff will attempt to contact the owner in an emergency.
- If unreachable, Flying Fur Pets may seek veterinary care at their discretion.
- Owner is responsible for all veterinary costs.

H. Photo/Video Use

☐ I allow ☐ I do NOT allow Flying Fur Pets to use photos/videos of my pet for marketing.

6. Liability Release & Assumption of Risk

A. General Liability Waiver

I understand and agree that Flying Fur Pets, its owners, employees, and agents are **not liable** for:

- Illness, injury, or death of my pet
- Injuries caused by my pet to other animals or people
- Loss, theft, or escape of my pet
- Damage to personal items
- Stress-related conditions (vomiting, diarrhea, anxiety, etc.)
- Injuries resulting from normal dog behavior (scratches, nicks, play bites, sprains, etc.)

I voluntarily assume all risks associated with daycare, boarding, grooming, and group play.

B. Infectious Disease Acknowledgment

I understand that even with proper vaccination, my pet may still contract illnesses such as:

- Kennel cough
- Canine influenza
- Upper respiratory infections
- Parasites or other communicable conditions

Flying Fur Pets is not responsible for these illnesses.

C. Medical Treatment Authorization

I authorize Flying Fur Pets to:

- Transport my pet to a veterinarian
- Approve treatment recommended by a licensed veterinarian
- Administer basic first aid

I agree to pay all associated costs.

D. Behavioral Disclosure

I certify that I have disclosed any history of:

- Biting
- Aggression
- Reactivity
- Anxiety
- Resource guarding

I understand that nondisclosure may result in dismissal and financial responsibility for damages.

E. Hold Harmless Agreement

I agree to indemnify and hold harmless Flying Fur Pets from:

- Claims
- Damages
- Losses
- Costs
- Attorney fees

arising from my pet's participation in any services.

F. Agreement to Policies

I acknowledge that:

- I have read and understand all policies.
- Policies may be updated at any time.
- Continued use of services constitutes acceptance of updated terms.

7. Signature & Agreement

I certify that I have read, understand, and agree to all Terms & Conditions and the Liability Release.

Owner Signature:	
Printed Name:	Date:
Staff Signature:	Date: