



BOARDING APPLICATION

ALL DOG ADVENTURES, LLC

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Existing clients: \$39.00 per night

New clients: \$45.00 per night

Client Information:

Name: _____
Address: _____ City _____ State _____ Zip _____
Home # (_____) _____ Work # (_____) _____ Cell # (_____) _____
Email _____ Fax # (_____) _____

Dog Information:

Dog's Name _____ DOB ____/____/____ Male _____ Female _____
Breed _____ Color _____ Spayed/Neutered _____ (Y) _____ (N)
Does your dog take medication or have a medical condition? _____ Yes _____ No
If yes, please describe: _____

Name(s) of people authorized to pick up your dog: _____

Emergency Contact Person (other than yourself or your Veterinarian):

Name: _____ Phone: _____

Is your dog used to being in a crate or kennel _____ Yes _____ No _____ Somewhat

Is your dog house trained? _____ Yes _____ No _____ Somewhat

Does your dog jump fences over 5 feet? _____ Yes _____ No _____ Somewhat

Does your dog get along with other dogs? _____ Yes _____ No _____ Somewhat

Does your dog have food allergies? _____ Yes _____ No _____ Don't know

If yes, explain: _____

Has your dog ever shown aggression toward a person or another dog? _____ Yes _____ No

If yes, explain: _____

Are you currently enrolled in a training class? _____ Yes _____ No

If yes, where and what class(es)? _____

Does your dog have anxiety with stormy weather? _____ Yes _____ No

If yes, explain: _____

Who can we thank for your referral? _____

In accordance with the Virginia Comprehensive Animal Laws, we are required to provide you with the following notice each time your dog stays with us at the daycare. In lieu of giving you a copy of this notice each time you come in, please read the following and sign the bottom indicating that you are aware of the information listed below.

NOTICE

THE BOARDING OF ANIMALS IS SUBJECT TO ARTICLE 3.1 (3-1-796.83:1 ET SEQ.) OF CHAPTER 27.4 OF TITLE 3.1 IF YOUR ANIMAL BECOMES ILL OR INJURED WHILE IN THE CUSTODY OF THE BOARDING ESTABLISHMENT, THE BOARDING ESTABLISHMENT SHALL PROVIDE THE ANIMAL WITH EMERGENCY VETERINARY TREATMENT FOR THE ILLNESS OR INJURY.

THE CONSUMER SHALL BEAR THE REASONABLE AND NECESSARY COSTS OF EMERGENCY VETERINARY TREATMENT FOR ANY ILLNESS OR INJURY OCCURRING WHILE THE ANIMAL IS IN THE CUSTODY OF THE BOARDING ESTABLISHMENT. THE BOARDING ESTABLISHMENT SHALL BEAR THE EXPENSES OF VETERINARY TREATMENT FOR ANY INJURY THE ANIMAL SUSTAINS WHILE AT THE BOARDING ESTABLISHMENT IF THE INJURY RESULTED FROM THE ESTABLISHMENT'S FAILURE, WHETHER ACCIDENTAL OR INTENTIONAL, TO PROVIDE CARE REQUIRED BY 3.1-796.68; HOWEVER, BOARDING ESTABLISHMENTS SHALL NOT BE REQUIRED TO THE COST OF VETERINARY TREATMENT FOR INJURIES RESULTING FROM THE ANIMAL'S SELF-MUTILATION.

I UNDERSTAND THAT PARTICIPATION IN DOGGY DAYCARE AT ALL DOG ADVENTURES IS NOT WITHOUT SOME RISK, THAT DESPITE ALL THE DOGS APPEARING HEALTHY AND BEING HANDLED WITH THE GREATEST AMOUNT OF CARE AND FORESIGHT, DOGS ARE NOT ALWAYS PREDICTABLE AND THE UNEXPECTED MAY OCCUR. I HEREBY WAIVE AND RELEASE ALL DOG ADVENTURES, ITS EMPLOYEES, OWNERS AND AGENTS FROM ANY AND ALL CLAIMS, WHILE ON THE GROUNDS OR THE SURROUNDING AREA THERETO AND RESULTING FROM PARTICIPATING IN ALL DOG ADVENTURES, INCLUDING SPECIFICALLY, BUT WITHOUT LIMITATION, ANY INJURY OR DAMAGE RESULTING FROM THE ACTION OF ANY DOG, INCLUDING MY OWN. I FURTHER AGREE TO PAY ANY VETERINARY / MEDICAL EXPENSES INCURRED AS A RESULT OF INJURY CAUSED BY MY DOG(S). I GIVE ALL DOG ADVENTURES PERMISSION TO SEEK VETERINARY CARE AT THE VETERINARIAN OF THEIR CHOICE IF THEY DEEM IT NECESSARY FOR THE DOG(S) AT MY EXPENSE, HOWEVER I WILL NOT HOLD ALL DOG ADVENTURES RESPONSIBLE IF THEY FAIL TO SEEK VETERINARY CARE.

Signed: _____ Date: ____/____/____

Print Name: _____