



First Time Guest Registration

Date Completed _____

For my first visit, I am interested in:

Boarding _____ Daycare _____ Grooming _____

Parent Information

Name _____ Email Address _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact _____ Phone _____

Veterinarian Name _____ Clinic _____

Phone _____

Guest Information

Name _____ Date of Birth _____

Breed _____ Color _____

Female/Male _____ Spayed/Neutered _____

Medical History/Vaccinations

Soggy Dog Salon & Suites requires that all vaccinations be administered by a licensed veterinarian. Written proof or verbal confirmation that all of your dog's vaccinations meet our standards will be required from your veterinarian **prior** to your dog's visit.

Medical History, recent or chronic, that we should be aware of? Please specify below:

Name of Medication	Dosage	# times/day	Special Instructions

How did you hear about us?

Website _____ Friend/Coworker/Relative _____ Signage _____ Website _____ Event _____
 Facebook _____ Advertisement _____ Vet's Office _____ Google+ _____ Phonebook _____

Other? (please tell us) _____

Would you like to be included in our mailing list? Yes _____ No _____

This form contains information we require. Thank you for choosing Soggy Dog Salon & Suites!

Customer Signature _____

Date _____

Employee Initials _____



First Time Guest Information (Complete if Boarding Only)

Date Completed _____

Parent Information

Name _____

Email Address _____

Guest Information

Name _____

Diet

What kind of food do you feed? _____

Amount given at each feeding? _____

How many times fed each day? Or Free Feed? _____

Prescription Diet? If yes, what? _____

Personality/Behavior

Commands or special words/phrases your dog understands: _____

Does your dog prefer men or women or no preference? _____

Has he/she ever shown aggression towards any person? If yes, please describe: _____

Does he/she enjoy playing with people? What activities? _____

Does he/she have a history of escape or escape attempts? i.e. opening doors, wiggling out of collars, jumping fences? If yes, please explain: _____

Does he/she enjoy playing with other dogs? _____

Would he/she enjoy spending time in group play/daycare with other guests? (permitting a positive temperament test result)

Any concerns or requests regarding group play/daycare? _____

Please list anything he/she is afraid of, if anything (i.e. thunder, lightening, hats, glasses, etc) _____



Authorization & Release (All Guests to Complete)

Name of Guest _____ Owner _____ Date Completed _____
 Name of Emergency Contact/Phone _____
 Home Phone _____ Cell Phone _____ Work Phone _____
 Veterinarian/Phone _____
 Pet Age _____ Color _____ Breed _____ Female/Male Spayed/Neutered

General Terms: Soggy Dog Salon & Suites will exercise reasonable care for the safety of your pet, and to keep the boarding premises sanitary and properly enclosed. Animals will be fed properly and regularly, and housed in clean, safe quarters. Soggy Dog Salon & Suites cannot guaranty against accidents and absent negligence on our part. We cannot be liable for loss or damage caused by or to animals at this facility. Owner agrees to be solely responsible for any and all attacks or damage caused by owner's pet while it is in the care of the pet care facility.

Flea and Tick Prevention: For the welfare of our guests, Soggy Dog Salon & Suites strongly recommends that your dog be on a flea preventative medication. Please understand that while we take every effort to ensure our facility is a flea-free environment, your dog may be exposed to fleas and/or flea eggs. All dogs are checked on arrival. If we note the presence of fleas and/or flea eggs, we will take proper precautions at the owner's expense.

Deposit: Soggy Dog Salon & Suites requires a nonrefundable deposit of \$25 per dog for stays 2 days and over and is due 48 hours prior to check-in date. Reservations must be cancelled 48 hours in advance of check-in time to qualify for refund of deposit. Deposits are nonrefundable without 48 hours advance notice of cancellation.

Photo Release: I agree that Soggy Dog Salon & Suites, Inc. may use such photographs of me and/or my dog(s) with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, web content, or social media sites. _____ (Initial)

Personal Items: Food, treats, and one favorite toy (NO Rawhides) are recommended. We provide your dog with a comfortable Kuranda cot and cozy fleece blanket. Due to potential contamination, we request that no beds or blankets from home. Soggy Dog Salon & Suites will not be held liable for any damaged or lost personal items.

Medication and Treatment Authorization: The owner agrees that Soggy Dog Salon & Suites may, in its discretion, give medication or other attention when we deem it necessary for the safety and health of the animal. Soggy Dog Salon & Suites is authorized by the owner to seek veterinary advice or care, including emergency care, at the owner's expense. If we believe that your pet is in need of veterinary care, if time permits we will try to contact you before obtaining that care, but this document serves as our authorization to obtain veterinary care for your pet regardless. The owner is responsible for expenses of veterinary care and transportation, whether or not you have been reached in advance. By signing this Authorization, you give Soggy Dog Salon & Suite's authority to make care decisions regarding your pet; and agree to pay for all costs incurred for said treatment. This Authorization applies to dogs at Soggy Dog Salon & Suites for any purpose, including but not limited to: boarding, grooming and daycare. _____ (Initial)

Geriatric Pets: Older pets may experience additional stress in the boarding, daycare or grooming environment. Soggy Dog Salon & Suites is dedicated to providing exceptional care for dogs, including geriatric animals. Your signature acknowledges that you are aware of any age related risks to your pet.

Group Play/Daycare Authorization: Involves dogs interacting and playing together in a group setting. Dogs in daycare or group play (or group potty breaks) may play in the pool, toss toys, and romp with other canine guests. Although these activities are supervised, anytime dogs play together, there is the possibility of injury from rough play or combative behavior. There is also an increased risk of transmission of ailments such as coughs, colds and parasites when dogs come into contact with one another. It is advisable to ensure that your dog is on a deworming protocol with your veterinarian. Just like human children in daycare, risks of upper respiratory infections occur in group play at dog parks, on the sidewalk or at Soggy Dog Salon & Suites. Dogs in daycare or group play may be outside for extended periods of time and may get wet. Your signature acknowledges that you are aware of the risks involved with any canine group activities, that you agree to hold Soggy Dog Salon & Suites harmless for the associated risks, and are authorizing your dog to enter into our group play or daycare program. _____ (Initial) I want my dog to participate in Group Play or Daycare [] Yes, always. [] No, never. [] Will decide on a visit by visit case.

This Authorization and Release will remain in force for all my dog's visits to Soggy Dog Salon & Suites, for any services including but not limited to boarding, grooming or daycare.

I hereby agree to the foregoing as the owner of the aforementioned dog(s). *I further certify that my dog(s) is (are) in good health and have not been ill with any communicable condition nor exposed to any communicable diseases within the last 30 days. Moreover, I certify to the accuracy of all information given about my dog(s) and that my dog(s) have not harmed or shown aggressive or threatening behavior toward any person or animal. I have read and understand the foregoing.*

Owner Signature _____ Date _____