

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Client Release Dog Form

Date: ____/____/20____

How did you hear about us? _____

If you were referred, please let us know as we like to reward our clients.

Your Information

Name: _____ Spouses Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Carrier: _____

Work: _____ Spouses Cell: _____ Spouses Work: _____

Place of Employment: _____

Address: _____

Spouses Place of Employment: _____

Address: _____

Email: _____

Spouses Email: _____

Emergency Contacts

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Pet Profile

Dog's Name: _____

Breed(s): _____

DOB: ____/____/20____

Sex: Male [] Female [] Spayed / Neutered: Yes [] No []

Tattoo [] Microchip [] Yearly License [] Lifetime License []

Coat Color: _____ Weight: _____

Distinguishing Marks or Characteristics: _____

Veterinarian's Name: _____

Address: _____

Phone: _____

Feeding & Medications

Brand of Food: _____ Formula: _____

Wet: [] Dry: [] Other: _____

Amount per Feeding: _____ Per Day: _____

Morning: _____ Afternoon: _____ Evening: _____

Supplements & Medications; Reason, Amount & Time Given: _____

Does your dog have any food or seasonal allergies? _____

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Health

What is the current health of your dog? Poor [] Good [] Excellent []

Please describe any medical or genetic conditions your dog may have? _____

What restrictions need to be placed on your dog's activity or movement? _____

Has your dog been diagnosed with any communicable diseases, bacteria or parasites in the past 30 days? Yes [] No [] _____

Does your dog have a problem with fleas? Yes [] No []

What flea or parasite control do you use? _____

We do not allow flea collars in daycare. Please remove them before bringing your dog.

Behavior

How long have you had your dog? _____

If adopted, do you have any knowledge of your dog's history? _____

Has your dog been in daycare or boarding before? Yes [] No []

How did they behave? _____

Does your dog have any fears? _____

Under what circumstances does your dog growl? _____

Has your dog been socialized with other dogs? Yes [] No []

Has your dog been socialized with men & women? Yes [] No []

Would you like your dog to play with other dogs while at Morgan's Paws? Yes [] No []

Is your dog aggressive towards people? Yes [] No []

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Is your dog aggressive towards other dogs? Yes [] No []

Has your dog ever bitten someone? Yes [] No []

Has your dog ever bitten another dog? Yes [] No []

Has your dog ever been bitten? Yes [] No []

What were/are the circumstances to anything checked yes above? _____

What commands does your dog know? _____

Does your dog have any problems in the following areas? Please elaborate on any areas marked below.

- | | |
|--|---------------------------------------|
| 1. Mouthing [] | 5. People aggressive / possessive [] |
| 2. Jumping [] | 6. Eating feces [] |
| 3. Destructive chewing [] | 7. Food aggression [] |
| 4. Ingesting non-food items [] | |
| 8. Growling at food or toys being taken away [] | |
| 9. Resource Guarding / Protective over belongings or area [] | |
| 10. Is your dog allowed blankets or bedding in their room? Yes [] No [] | |
| 11. Is your dog crate trained? Yes [] No [] | |
| 12. Are you able to take your dog by the collar? Yes [] No [] | |
| 13. Does your dog climb or jump fences? Yes [] No [] If so how high was the fence? | |

Please add any other comments or information that you feel may be helpful in caring for your dog.

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

You are responsible for informing us of any and all incidents of bites or aggression concerning your dog (dog to dog, dog to human, etc.). Failure to do so may result in your daycare or boarding services being terminated. Under the event of an emergency you must have an emergency contact available to come pick up your dog if anything were to arise where we are unable to properly care for your dog due to aggression towards our staff.

If your dog becomes ill or injured while in our care, Morgan's Paws Pet Care Center, LLC will make every attempt to contact you & then the emergency contact. If we are unable to contact you Morgan's Paws Pet Care Center, LLC will reserve the right to administer aid by a veterinarian without liability.

Please attach or have your vet fax in a copy of your most recent vaccinations. We require all dogs to be **current** on Rabies, DHLPP & Bordatella (due every 6 months for daycare dogs). **These vaccinations must be up to date at all times & it is your responsibility to bring us the most recent copies when new vaccinations are given.** We require all vaccinations to given by a veterinarian. No home vaccinations will be accepted.

It is the owner's responsibility to inform Morgan's Paws, LLC of any existing health conditions or any new health conditions as they are identified. On admission, all dogs must be free from any condition which could potentially jeopardize other dogs. Dogs that have been ill with a communicable disease in the last 30 days will require veterinary certification of health to be admitted or readmitted.

One form must be completed per pet.

We accept Cash, Visa, MasterCard, Discover & American Express for payment.

Our hours are Monday – Friday from 6:30am – 6:15pm, Saturday 9am – 4pm, Sunday Closed. Sunday arrivals & departures are by appointment only. We are closed on holidays. All boarding dogs must arrive at least one hour prior to us closing. Any dogs arriving after 5pm must first be fed dinner before arriving. All departing dogs must be picked up by 11am or will be charged a \$20 fee (boarding only), or a \$29 fee for daycare boarders on the day of departure.

All dogs must come to daycare a minimum of 2 times per month, every month, or more if we feel necessary to continue daycare. There are no exceptions to this policy. Daycare cancellations must be made by 7am of that day. The first no show is a warning, 2nd is a \$10 charge & the 3rd will be a full day's charge of \$29. Daycare packages expire after 90 days.

Boarding cancellations must be made 4 days prior to the day of drop off, however, if it falls over a holiday, we require 5 days prior to the day of drop off. If you plan to pick up your dog early from boarding, you must give a 24 hour notice to not be charged for the remaining nights. Boarding reservations require a deposit to hold a room. We will not hold any rooms until the deposit is made.

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

If you call to extend your stay by more than one day you will be need to pay the current balance up to that day.

All food must be brought in a sealed container with your dog's name on it. If you choose to use our food there will be a charge per meal. You may bring in any items from home that you would like your dog to have with them during their stay. Please do not bring in any items if your dog is only here for daycare. We have our own toys for them to use. Morgan's Paws Pet Care Center, LLC will not be responsible for any lost items while your dog is with us. If your dog is prone to chewing things please let us know in advance so that you do not get charged for items that your dog destroys.

All dogs must be on a leash to enter the building. If you must use a retractable leash please have it locked. We would prefer you to use a regular 4 foot or 6 foot leash to bring your dog in on. All dogs must have a collar free from chains or spikes while in daycare.

Please remember that not all dogs that come to Morgan's Paws Pet Care Center, LLC are friendly towards other dogs or people. Before you allow your dog to approach another dog please ask the owner first.

We will post closings or delays due to weather on our Facebook & Instagram page.

By signing below, you are stating that you have read & agree to the above mentioned information.

Print & Sign

____/____/20____

Date

Print & Sign

____/____/20____

Date

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Boarding Terms & Conditions

Initial Each Line

_____ 1. I understand that I am solely personally & financially responsible for any harm caused by my dog(s) to another dog or person while my dog(s) is boarding at Morgan's Paws Pet Care Center, LLC.

_____ 2. I understand that Morgan's Paws Pet Care Center, LLC is not responsible for any lost or damaged items that are brought in from home.

_____ 3. I understand & agree that any medical issues that arise with my dog(s) will be treated as deemed best by Morgan's Paws Pet Care Center, LLC staff & volunteers, at their sole discretion, & I will assume full financial responsibility.

_____ 4. I understand and agree that provided reasonable care and precautions are followed, Morgan's Paws Pet Care Center, LLC will not be held responsible for injuries to my dog arising from my dog (s) attendance and their participation at Morgan's Paws Pet Care Center, LLC daycare and I release them of any liability whatsoever.

_____ 5. I understand and agree that if I fail to provide proof of current vaccinations or my dog's vaccinations are found to be expired or otherwise incomplete, Morgan's Paws Pet Care Center, LLC has the right to refuse service until current proof is provided.

_____ 6. By initialing here you give Morgan's Paws Pet Care Center, LLC the right to use pictures of your dog(s) on our website, Facebook, advertising, and other forms of newsletters and such.

_____ 7. I understand that I must put a deposit down to hold a room for my pet for boarding. If I don't cancel within the amount of time required I will lose my deposit. Boarding cancellations must be made 4 days PRIOR to the day of drop off. If the boarding stay falls over a holiday we require 5 days PRIOR to the day of drop off.

_____ 8. I understand that if I plan to pick up my dog(s) early from boarding that I must give at least a 24 hour notice or I will be charged for the remaining days left of my stay.

_____ 9. I understand that my dog(s) will be kept in close proximity of other boarding / daycare dogs and because of this there is a risk contagious diseases being spread. I agree to not hold Morgan's Paws Pet Care Center, LLC responsible if my dog does contract a contagious illness.

_____ 10. I agree to take precautions against my dog(s) coming into Morgan's Paws Pet Care Center, LLC & spreading contagious illnesses to other pets in our care.

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

_____ 11. I understand that if I choose to have my dog(s) shuttled I understand the risk associated with transporting dogs in a motor vehicle & will not hold Morgan's Paws Pet Care Center, LLC responsible for any accidents.

_____ 12. I understand that I must bring food in for my dog(s) in a sealed container with a lid.

_____ 13. I understand that I must have an emergency contact available to come pick up my dog(s) if anything were to arise where we are unable to properly care for your dog due to aggression towards our staff.

_____ 14. I understand that if I do not pick my pet up by closing that my pet will have to stay another night & I will be charged for that night or I will pay a \$50 fee to pick my pet up within 1 hour after closing time.

_____ 15. I hereby release Morgan's Paws Pet Care Center, LLC, its employees, owners, agents & customers of any and all liabilities for injuries to myself, property and pets that may arise from services or products provided.

_____ 16. I understand & agree to the terms & conditions set for by Morgan's Paws Pet Care Center, LLC.

By signing below you are stating that you have read & agree to the above mentioned information.

Print & Sign

____/____/20____
Date

Print & Sign

____/____/20____
Date

Initials: _____