



Client Registration Form

Dog Information

Name: Breed: Male/Female:
Age: Birthday: Spayed/Neutered:
Colour: Tagged/Chipped: Microchip Number:

Vet Practice Details:

Medical Problems/History: Allergies:

Recent Injuries:

Temperament

Has your dog ever shown signs of aggressive behaviour?

Has your dog bitten someone or another dog?

Does your dog have any fears or obsessions?

Does your pet try to escape enclosed areas?

How often does your dog socialise?

Have you used a Doggy Day Care centre previously?

Please note any other information we may need to know:

Vaccinations

5 in 1 (Dhppv, Distemper, Parvo etc) – REQUIRED **Kennel Cough - ADVISED**

Please attach a separate copy of your dog(s) vaccination card.

Flea & Worm – Date Received: Due Date:

Owner Information

Name: Phone: Email:

Home Address:

Emergency Contact Name: Relationship to Owner:

Phone:

Day Care Requirements

How many days would you require Doggy Day Care?

Do you have a preferred day/s?

Would you be looking for full or half days?

Do you authorise Featherbed to post pictures on our social media platforms of your dog?



Terms & Conditions

Liability

I (the owner) represent that I am the legal owner of the dog(s) I have named on the Featherbed Doggy Day Care Registration Form. I confirm to Featherbed Doggy Day Care, that my dog has not been ill with any contagious diseases within the past 30 days. I confirm my dog has had all vaccinations required and I understand how important it is to keep them up to date when attending Featherbed Doggy Day Care. I agree to send Featherbed a copy to show my dog has received their yearly vaccination boosters.

I understand that Featherbed is an open day care centre, and I understand and authorise my dog to socialise with other dogs and accept the risks involved. I agree that although Featherbed will take full care of my dog whilst on site, they are not liable for any injuries or illnesses that may occur during my dog's attendance.

If any medical problems develop while my dog is in the care of Featherbed and I cannot be contacted, I authorise them to do whatever they deem necessary for the safety, health and well-being of my dog. I agree to assume full financial responsibility for all expenses incurred.

I understand that if my dog shows any signs of aggression or biting, Featherbed reserve the right to refuse entry.

If I choose to send a meal with my dog, I authorise Featherbed to separate my dog into a private area to be fed.

If my dog is a female, I agree that my dog must be kept away for the time they are in season and for one week after they finish their season.

I understand that I must provide Featherbed with a minimum of 24 hours' notice, if I am no longer needing to use their services on a day I have booked. Failure to this will result in the normal day charge.

I understand that charges may apply if I am late to pick up my dog past opening hours of the day care. 6pm Monday-Thursday & 5pm on Fridays. Featherbed reserve the right to charge £5.00 for every 5 minutes after closing.

If I arrange a trial for my dog, I acknowledge and agree that failing to provide notice of non-attendance will result in the normal price charge.

I confirm I have been completely honest about all information I have provided; I have read all the above carefully and I accept the terms and conditions.

Print Full Name: _____

Signature: _____

Date: _____