



DOG TRAINING

BEHAVIOR COUNSELING

COUNTRY BOARDING

Thank you for your interest in Town & Country Canine's boarding services!

Please call ahead to make a reservation!!

Attached is our Boarding Contract Form. Please fill this out, and fax written proof from your Veterinarian of up-to-date vaccinations (Distemper/Parvo, Rabies, and Bordetella). It is important that this is faxed to us @ 607 652-2207 before your visit.

At the time of your dog's visit, we will need the following items:

- **Any medications** your dog is on, including heartworm and flea/tick preventative if your dog's stay coincides with the day of the month you normally give these to her.
- **Dog food.** Please mark the bag with your **dog's name**. *(Please **do** bring your dog's food with you – as switching dog food can be stressful on your dog's stomach. We want your dog's stay with us to be as stress free as possible!)* **You do not need to bring your dog's food bowls.**
- **Dog toys** your dog is particularly fond of.
- **Something that smells like you** – a shirt, a blanket.

Drop off and pick up times are **9 a.m. to 2 p.m.** **Please schedule the approximate time of your arrival in advance,** I might be out with the dogs ❤️

I look forward to meeting you, and spending time with your dogs!

Kind regards,

Karen Miller, CPDT-KA
Town & Country Canine LLC

KAREN MILLER, CPDT

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WWW.TOWNANDCOUNTRYCANINE.COM



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Boarding Service Contract

Arrival and Departure (please schedule a time between 9 am and 2 pm)

Arrive (date and time):	Depart (date and time):
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Client Info:

Guardian's Name:	Referred By:
Home Phone:	Cell Phone:
Work Phone:	E-mail:
Address:	
Dog's Name:	Breed: Age:
	Sex: Neutered (N) or Spayed (S):
Dog's Name:	Breed: Age:
	Sex: Neutered (N) or Spayed (S):

Emergency Contact

(Someone authorized by you to make decisions regarding your pet's care, veterinary or otherwise, in the event you are unable to do so)

Emergency Contact #1 Name/Phone:
Emergency Contact #2 Name/Phone:

Medical & Behavioral Information

Veterinarian: _____ Address: _____ Phone: _____
Dog's medications: _____ Health Problems: _____ Behavioral Issues: _____
Heart Worm Prevention: _____ Date Given: _____ Flea/Tick Prevention: _____ Date Given: _____
If your dog will require heartworm or a flea/tick preventative during their stay – please be sure to bring the medication with you.

Dietary Information

Food Brand: _____ Amount: _____ Frequency: _____ Dietary Restrictions: _____

Consent Required

I give permission for my dog to receive treats during their stay.

Please check box: Yes No

Please Initial:

If available, I would like my dog to play with other dogs during their stay. My dog is not dog aggressive, and does not protect his toys from other dogs.

Please check box: Yes No

If you check “yes” – we will ask more questions about your dog so that we can match your dog to playmates.

Please Initial:

I give consent for my dog(s) to swim in the pond off-leash while supervised. My dog will return when called.

Please check box: Yes No

If you check “yes” – we will ask more questions about your dog’s off-leash skills.

Please Initial:

Additional Information

Is there anything else you would like us to know about your dog(s)?:

Boarding Rules and Requirements

Our goal is to make sure that your pet has a wonderful and safe time while “vacationing” with us. For that reason, it is imperative that your dog is healthy, so that the rest of the “vacationers” have a great stay with us too!

All dogs should be in good health, free of communicable diseases and written proof from a veterinarian of these current vaccinations is required:

- Distemper and Parvo (sometimes called the 5-in-1 shot DHLPP or DA2PPV)
- Rabies
- Bordetella (canine cough). Bordetella must be administered within the past 12 months and at least 14 days **prior** to your pet’s visit.
- We also require the use of a monthly flea and tick preventative.

Please fax your dog’s vaccination record to 607.652.2207

Boarding Cancellation policy: 72 hours notice before the reservation is required for cancellations. If less than 72 hours, a cancellation fee will be incurred. Due to our limited space, and because unlike many kennels, **we do not charge more to book holiday stays, we have a non-cancellation policy for holiday bookings.** Holidays include Memorial Day, Labor Day, and Independence Day Weekend, the week of Thanksgiving and the weeks of Christmas & New Years. **If you book a reservation during one of these holidays, and cancel for any reason, you are still financially responsible for the full cost of your cancelled boarding reservation.**

Dogs’ owners are financially responsible for any damage or destruction to the kennel enclosure caused by their pets.

Please Initial:

Authorization, Acknowledgment & Waiver

Town & Country Canine LLC, Karen Miller, its owners and employees, (collectively "TOWN & COUNTRY CANINE"), will endeavor to create as safe an environment as possible for the boarding care of my dog and will offer only sound, safe, and responsible care.

I, _____, certify that I am the owner or the agent of the owner of _____, and that I am authorized to board the pet and be legally bound by the terms of this form.

I understand that the use of the facilities requires that I am responsible for and I assume the sole risk of acquiring, reviewing and understanding all rules, regulations, policies and procedures in effect at the time services are rendered.

I am and will remain responsible for the actions of my dog at all times and I hereby agree to indemnify and hold harmless TOWN & COUNTRY CANINE of any and all claims of injury, expense, costs, or damages caused by the actions of my dog while under TOWN & COUNTRY CANINE care and under my own care.

I agree that TOWN & COUNTRY CANINE shall not be held responsible for injuries or illness to myself, my pet(s), my guests or invitees other patrons and/or pets who may be injured or bitten by my pet or by my acts or omissions or by the acts or omissions of my guests and invitees and I agree to indemnify and hold harmless TOWN & COUNTRY CANINE for any and all costs, damages, claims or expenses that may result there from. I further assume risk and acknowledge that TOWN & COUNTRY CANINE shall not be held responsible for any illness or ailment that may affect my pet during its visit or stay at TOWN & COUNTRY CANINE and will indemnify and hold TOWN & COUNTRY CANINE harmless for any costs, expenses or damages resulting from any such illness or condition. With respect to myself, my pet and my guests and invitees, I shall indemnify and hold TOWN & COUNTRY CANINE harmless for any costs, damages or expenses that we may incur from our use of the TOWN & COUNTRY CANINE facilities. I further agree for myself, my pets and my guests and invitees that I shall be solely responsible and shall not seek indemnity from TOWN & COUNTRY CANINE damages, claims or expenses that we may incur as a result of injury, sickness or other harm to my pet(s) while under the care of TOWN & COUNTRY CANINE.

I certify that my I have reviewed my pet's vaccination records and hereby affirm that the information reflected therein is true and accurate to the best of my knowledge. I further affirm that I have informed TOWN & COUNTRY CANINE of any known injuries, illnesses or ailments from which my pet(s) may currently suffer and believe my pet to be in sufficient health to safely utilize the TOWN & COUNTRY CANINE facilities and services. I authorize TOWN & COUNTRY CANINE to contact my veterinarian in order to confirm the health, temperament and vaccination history of my pet(s). If, in my absence, my pet should become injured, ill, suffer an ailment or is otherwise deemed in the sole discretion of TOWN & COUNTRY CANINE to require immediate veterinary attention, TOWN & COUNTRY CANINE is hereby authorized to consult with my veterinarian. If my veterinarian is unavailable or located at too great of a distance, TOWN & COUNTRY CANINE is authorized to utilize the services of another licensed veterinarian to provide care for my pet(s). I understand that I shall be responsible for any and all charges incurred with respect to such veterinary care. Further, should I be required to take my pet to a veterinarian after a stay or visit at TOWN & COUNTRY CANINE, I shall be solely responsible for any and all veterinary or other related or unrelated charges, costs or expenses and shall not seek indemnity or reimbursement from TOWN & COUNTRY CANINE.

I agree that the names and likenesses of my, my pet(s) my guests and invitees may appear in TOWN & COUNTRY CANINE promotional materials, including but not limited to advertising, printed materials, promotional video media, news programs or other press related materials, magazines, or on television, radio, the internet and/or the TOWN & COUNTRY CANINE website from time to time.

It is my intention by this agreement to exempt, release and relieve TOWN & COUNTRY CANINE, its owners, agents, employees, servants, volunteers, and students from any and all liability for personal injury, disease, property damage and wrongful death caused by their own negligence or the negligence of any third party.

By signing below, I acknowledge that I have read and fully understand the terms of this Authorization, Acknowledgment & Waiver and accept each term and condition contained herein.

Signature _____ Date: _____

**Please complete these forms and fax them to 607.652.2207
prior to your pet's vacation at Town & Country Canine.
Thank you! We look forward to spending time with your dog!!**