

Guest Application

PARENT INFO					
Name:	Email:				
Address:					
City:	State: Zip:				
Phone #:	Secondary Phone #:				
Emergency Contact:	Relationship:				
Phone #:	Secondary Phone #:				
* Emergency Contact is an individual who can act on your beha in case of an emergency and we are unable to contact you.	half Are you a veteran? \square No \square Yes				
PET INFO					
Name:	Date of Birth: Weight:				
Breed:	Coat Color: Sex:				
Spay or Neuter: \square No \square Yes					
Veterinarian Clinic:	Doctor's Name:				
Address:					
City:	State: Zip:				
Phone #:					
MEDICAL INFO					
Does your pet have any allergies to food?	□ No □ Yes				
If yes, please note:					
Does your pet have any physical limitations? \square No \square Yes					
If yes, please note:					
Does your pet have any health concerns tha	at should be monitored? L No L Yes				
If yes, please note:					
Does your pet have any medications that wil	rill need to be administered? U No U Yes				
If yes, what kind, how often & how they are ad	dministered?				
FOOD					
The Center will only distribute food that is provided by t	the pet's owner unless further enrichment is requested.				
How would you like us to feed your pet? \Box	Wet Food Dry Food				
☐ Morning How much	h food? cup(s)				
☐ Afternoon/Snack How much	h food? cup(s)				
☐ Evening How much	h food? cup(s)				

TELL US MORE 1. Has your pet ever growled or bit a person or another dog? ∐ No If yes, what were the circumstances? No Yes 2. Has your pet been socialized with other dogs? 3. Has your pet been to the dog park? No 4. Has your pet been to another dog day care facility? No □ No 5. Is there any type of dog your pet doesn't play well with? Yes What type? □ No 6. Is your pet sensitive to handling in any way? Yes If yes, please note: No Yes 7. Will your pet go into a crate? 8. Anything else we should know? PERSONS AUTHORIZED FOR DROP OFF/PICK UP All parties will be asked to show identification when dropping off/picking up your pet. 1. 2. 3. DOG DAY CARE & BOARDING WAIVER AND RELEASE I understand that participating in any dog day care or dog boarding at The Center at Animal Humane includes an element of risk for both me and my dog. I agree to abide by any decision of an employee relative to the including, but not limited to, illness, falls, contact with other participants and dogs, and surface conditions, all risks being understood and appreciated by me. I also affirm that the dog(s) that I will be participating with has current vaccinations appropriate to his/her age. Having read this waiver and knowing these facts, and in con-

I understand that participating in any dog day care or dog boarding at The Center at Animal Humane includes an element of risk for both me and my dog. I agree to abide by any decision of an employee relative to the dog's and my ability to complete the stay safely. I further assume any and all risks associated with participating including, but not limited to, illness, falls, contact with other participants and dogs, and surface conditions, all risks being understood and appreciated by me. I also affirm that the dog(s) that I will be participating with has current vaccinations appropriate to his/her age. Having read this waiver and knowing these facts, and in consideration of the acceptance of my registration, I hereby for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge The Center at Animal Humane, it's trainers, volunteers and employees in any way assisting or connected with this activity from any claims or liability of any kind whatsoever arising out of my participating in dog day care or dog boarding sessions, even though the liability may arise out of negligence or carelessness on the part of the persons or parties named in this waiver. I also understand that The Center at Animal Humane may subsequently use, for publicity or promotional purposes, my name or pictures of me or my pet without liability or obligation to me. I have read and agree to the above waiver:

Date:	Owner Name:	
Owner Signature:		

- A credit card on file is required for all boarding and day care services.
- Reservations during holidays and high season require a 50% non-refundable non-transferable deposit.
- Check-out is at 10AM for all pets boarding on the day of their departure. If a later check-out time is desired we offer VIP Check out for \$25.00.
- To avoid a \$100.00 cancellation charge, all boarding reservations must be canceled 7 days prior to your check-in date.

End-Of-Life Options

End-of-life decisions are excruciatingly difficult. In the unlikely event your pet passes while in our care, please share what actions you want The Center Team to take if we cannot reach you:

- 1. Contact a friend or family member to pick up your pet in your absence. If this is your wish, we encourage you to discuss this with your friend or family member, including any instructions regarding your pet, beforehand. (Name/Phone/Email)
- 2. Contact your veterinarian so that they may make arrangements for your pet's necropsy. In the event your chosen veterinarian is not open, or available to receive your pet when we call, please select a second option. (Name/Phone/Email)
- 3. Contact Best Friends Pet Cremation (bestfriendspetcremation.com) or Lasting Paws Pet Memorial Services (lastingpawspetmemorial.com) on your behalf. Both are located in Albuquerque and offer compassionate cremation services and personalized memorial options. Fees for service will apply and could be selected by you.
- 4. Contact the City of Albuquerque Animal Welfare Department to collect your deceased pet free of charge.

Date:	Owner Name:	