

Bay D, 2020 32nd Avenue N.E Calgary, Alberta T2E 6T4 Phone: 403-769-0062 Fax: 403-769-0078 info@dogaholics.ca www.dogaholics.ca

Boarding and Daycare Profile and Release Form

Last Name	Pet Name
First Name	Breed
Address	Color(s)
	Spayed /Neutered? Yes No
	Sex: M F
Home #	D.O.B
Work #	Vet Clinic
Cell #	Vet Phone #
Other#	Vet Name
Email	
Emergency Contact (Name/Phone #)	
Please circle all that apply, please Explain in detail b	elow
Allergies Noisy (Excessive Barking) Biter	Fence Climber Toy Aggression
Aggressive Towards People Aggressive toward	s other Dogs/Animals
Other (please specify below)	
Pet Release	
pet's best interest, by obtaining veterinary care at magree to pay all other services incurred by and for magree to pay all other services incurred by and for magreen, place object or animal. This boarding facility death and damage to and from my pet; however, in directors, staff, agents or volunteers, shall not be he the day of pickup of my pet. I agree to pay all costs of pickup of my pet, and I understand my pet may not any animal left for five (5) days beyond the pick up of Dogaholics Services Inc.	It this establishment, Dogaholics Services Inc, to act in my behalf, and in my y expense, if deemed necessary, for all illness, injury or death. I further y pet during its stay at this facility. This includes any injury or damage to a agrees to exercise all due and responsible care to prevent injury, illness, the event of illness, death or damage, this facility, owners, successors, id liable. I agree that all boarding and daycare fees must be paid in full on or any property damage or personal injury caused by or for my pet the day of leave the premises until all charges are paid for in full. I understand that ate may be adopted by a third party at the discretion of this establishment,
Name (please print)	