



Melanie Smith  
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## BOARDING REGISTRATION

**Required\***

\*Owners' Name: \_\_\_\_\_

\*Street/City/Prov/Postal Code: \_\_\_\_\_

\*Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\*Dogs' Name: \_\_\_\_\_

Breed: \_\_\_\_\_

\*Age/D.O.B: \_\_\_\_\_

\*Sex:  Male  Female

\*Altered:  Yes  No

\*Amount of Food/Day: \_\_\_\_\_

\*Allergies: \_\_\_\_\_

\*Medication: \_\_\_\_\_

Special Instructions & Items: \_\_\_\_\_

\*Drop off Date & Time: \_\_\_\_\_

\*Pick up Date & Time: \_\_\_\_\_

\*Emergency Contact & Number: \_\_\_\_\_

**Helpful Suggestions:**

- Upon arrival, bring your paperwork and dog's belongings in first
- Bring your dog in after a quick walk and pee break
- If you are concerned about your dog not eating, bring their regular food dishes
- Bring your dog's food in a plastic, labelled, sealed container
- Payment for your dog's stay is due at pick up. We accept cash or cheque. Check out is 11am. Late check out is an extra day charge

Continue on back...

## **\*Boarding Waiver**

My checkmarks and signature on this document indicates that I have read it and clearly understand all of its terms. I agree to the following:

- I will be responsible for the actions of my dog if it causes any damage whatsoever, including but not limited to damage or injury of other dogs, people or objects while in the care of Melanie Smith and Melanie is not responsible for any damage caused by my dog
- My dog is suitable to be in the care of Melanie Smith and is not aggressive toward people or other animals. My dog is obedient and capable of following instructions
- I understand there are risks involved with having my dog cared for by Melanie Smith. In the event of illness or emergency care, I authorize Melanie to take my dog to the nearest vet. I agree to pay all vet care required or advised in the opinion of the vet up to \$500. If the care will exceed that amount, I know Melanie will contact me at the numbers provided on the waiver. If I cannot be reached, Melanie will contact the emergency contact provided on the form.
- I understand that having my dog in the company of other dogs involves risk of illness. I understand that regular vaccinations cannot completely guard against illness and that Melanie cannot prevent any illness my dog may contract.
- I ensure my dog is up-to-date on vaccinations and will provide a vaccination certificate from the veterinarian as requested at drop off.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Would you like your dog's nails trimmed (\$20)?  yes  no

Would you like any training done (\$15/day)?  yes  no

How did you hear about me? \_\_\_\_\_

Where are you going? \_\_\_\_\_