

TWO PONDS PET LODGE AND DOGGY DAY CAMP
9530 WEST 80th AVENUE • ARVADA, CO 80005 (303) 432-2771
CLIENT / PET INFORMATION

Owner's Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Cell: (____) _____ - _____ Other #: (____) _____ - _____

How did you hear about us? (Circle one): (YELP or Google) (Face Book) (Drive By) (Vet : _____)
(Referred by : _____) (Other : _____)

SECONDARY Owner: _____ Phone: _____

Current Veterinarian: _____ Phone: _____

1st Pet's Name: _____ Species: Canine Feline Other: _____

Breed: _____ Color: _____ Age: _____ Birthday: __/__/__

Male Intact Male Neutered Female Intact Female Spayed Weight: _____

Any Allergies? NO or YES, Fence Jumper? NO or YES, Fear of Thunder Storms YES or NO

Please specify:

2nd Pet's Name: _____ Species: Canine Feline Other: _____

Breed: _____ Color: _____ Age: _____ Birthday: __/__/__

Male Intact Male Neutered Female Intact Female Spayed Weight: _____

Any Allergies? NO or YES, Fence Jumper? NO or YES, Fear of Thunder Storms YES or NO

Please specify:

3rd Pet's Name: _____ Species: Canine Feline Other: _____

Breed: _____ Color: _____ Age: _____ Birthday: __/__/__

Male Intact Male Neutered Female Intact Female Spayed Weight: _____

Any Allergies? NO or YES, Fence Jumper? NO or YES, Fear of Thunder Storms YES or NO

Please specify:

Emergency Contacts OTHER than owners – Also authorized to drop off or pick up your pet(s)

1) _____ Phone: (____) _____ - _____

2) _____ Phone: (____) _____ - _____

*We will not share your email address with anyone. We will only use your email to send you reminders regarding vaccinations, annual wellness, fecal and heart worm test reminders, promotions, contests, recalls (such as food recalls), disease alerts, educational classes held at our hospital, and free coupons for medical services and boarding.

CLIENT CONTRACT

BILLING POLICY: Payment for service is due at time of pet pick up. Pets MAY NOT be discharged without payment in full. **Boarding fees are: per night, per dog, per run.** Check out time is by 2:00 pm. Any departures after 2:00 pm will incur an additional ½ day boarding fee. **Day camp fees are: per dog, per day, or per package rate.** All grooming fees are based upon discussed established rates and times required.

ASSUMPTION OF RISK: As a pet owner leaving my pet at Two Ponds Pet Lodge (TPPL), Please understand that there are certain inherent risks of injury or illness that exist in a Boarding/Day Camp/Grooming situation. I agree to release, hold harmless and indemnify TPPL and each of its respective agents, employees (including, without limitation, all treating, and supervising veterinarians), directors and affiliates from any and all actions, causes of action, claims of action, claims, damages, costs, loss of services, expenses and compensation, on account of, or in any way growing out of, any known and unknown, foreseen and unforeseen injuries, illness, and damages resulting or arising out of, directly and indirectly, from the services rendered by the TPPL to us (client and patient). By signing this contract the owner gives consent that certain products used in the facility are not labeled for use in pet animals such as, over the counter medication brought in by owners, peanut butter, rice, pumpkin, and broth.

MEDICAL ILLNESS POLICY: In the event that our staff recognizes that your pet needs veterinary care either due to illness or injury, it will be seen by a veterinarian. This may necessitate transport to Indian Tree Animal Hospital or a 24 hour facility (Animal Urgent Care) on an emergency or non-emergency basis. We will attempt to contact you as soon as possible at the phone numbers you have provided regarding your pet's symptoms, treatment options, and estimate of additional costs. If no one can be reached however, we will engage the services of the above mentioned veterinary hospitals as required for stabilization and treatment to relieve discomfort or to resolve any important medical conditions. Any and all veterinary care will be the sole financial responsibility of the owner and due at the discharge from either facility. In addition, occasionally, after departures, pets may develop problems from environmental and dietary changes encountered as a result of boarding. Please be aware and understand that conditions such as coughing, diarrhea, weight loss, or lack of appetite can develop and that TPPL is not responsible for these conditions, if they do occur. All animals staying at TPPL must be in good health; that is, they must not have been ill with an infectious disease/condition within the last 30 days. This policy is in place for the safety and protection of all guests at TPPL.

DAYCAMP: DOGS MUST: Be at least 4 months old, FULLY vaccinated, and of a sufficient size to safely participate in Doggie Day Camp. TPPL allows unaltered dogs to participate in Day Camp until they are 1 years of age. After 1 years of age they must be spayed or neutered to continue participating in Day Camp.

I understand that while participating in day camp at Two Ponds Pet Lodge my dog will be playing in a group of other dogs.

I give my permission for my dog(s) to participate in doggie day camp. _____ (Initial)

ADDITIONAL REQUIREMENTS: If a death were to occur while the pet is under the care of Two Ponds Pet Lodge, your pet will be carefully transported to Indian Tree Veterinary Hospital and held for owner until their return.

VACCINATION POLICY:

*** (Must Initial Vaccine Policy) _____ ***

****PLEASE NOTE, IF NOT FULLY VACCINATED, PETS CANNOT STAY.****

To ensure the protection of all pets under our care, all pets must be up-to-date on ALL required vaccines:

DOGS: Rabies, DHPP, Bordetella (Required every 6 months)

CATS: Rabies, FVRCP

If not up-to-date, or Unable to provide proof of current vaccinations, I give my permission to update my pet(s) vaccines in accordance with the above policy.

I understand and agree to the provisions above. I will be responsible for any and all costs incurred for services and treatment of my pet(s). I will not hold Two Ponds Pet Lodge and/or Indian Tree Animal Hospital, its owners or employees responsible for unavoidable illness, injuries, or death resulting from the actions of my pet or another pet. This is a contract between Two Ponds Pet Lodge and the client.

Owner's Name: _____ Pet/s Name: _____

Owner's Signature: _____ Date: _____