

GROOMING REQUIREMENTS

1. It is recommended that male dogs over 6 months of age be neutered and female dogs be spayed for improved health and comfort; however it is not required.
2. All dog should be in good health and free of communicable diseases. A record of the following vaccinations is required: Rabies, DHLPP and Bordetella. Because we are a daycare and boarding facility as well as grooming, we must require Bordetella (for kennel cough). It must be administered within the last 6 months and no sooner than 10 days prior to your appointment.
3. Dogs must be non-aggressive. For safety purposes, owners will need to sign a contract stating that their dog has not harmed or exhibited overly aggressive behavior toward any person.
4. We must receive a completed Grooming Application and current vaccination record before grooming can commence. You may fax it to us or bring it with you on the day of your appointment.



Daycare • Boarding • Spa

Application for Grooming

Today's Date _____ How did you hear about us? _____

Owner Information (Please Print)

Name _____

Address _____

City, State, Zip _____

Home Phone _____

Cell Phone/Pager _____

Email _____

Emergency Contacts

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

Name _____

Phone _____

Pet Information

Please circle: Dog or Cat

Name _____

Breed _____ Sex _____ Age _____ Birthdate (if known) _____

Veterinarian Name _____

Phone _____

Health & Grooming Information

Does your dog have any allergies? _____

Does your dog have hip dysplasia or arthritis? _____

Please describe any other health concerns (injuries, warts, tumors, marks) that you feel we should be aware of:

How does your dog react while being groomed? _____

Health & Grooming Information (Continued)

Has your dog ever bitten someone? _____ If so, what were the circumstances? _____

Date of Last Grooming? _____

Any problems with a previous Groomer? _____ If so, what? _____

What grooming services would you like for your dog? _____

Authorization, Acknowledgment & Waiver

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 hereby authorize Hounds on the Hudson, LLC (hereinafter "Hounds on the Hudson") to maintain my credit card number on file and charge purchases made and/or services obtained against the card at the prices in effect at the time of the transaction. All charges are final when made. Should my credit card charges be declined or any other charges remain unpaid, Hounds on the Hudson reserves the right to assess a finance charge of up to 15%.

I understand that the use of the facilities requires that I am responsible for acquiring, reviewing and understanding all rules, regulations policies and procedures in effect at the time services are rendered. I understand that Hounds on the Hudson reserves the right to refuse service or use of its facilities to pets who, in Hounds on the Hudson's sole determination, act aggressively, are undisciplined, evidence inappropriate or anti-social behavior, may otherwise be a danger to themselves or other animals or people, or for any other reason whatsoever.

I acknowledge that pets are encouraged to socialize and exercise at Hounds on the Hudson and that through roughhousing, playing and other activities, injuries to pets, owners or their guests might reasonably be foreseen may occur within our facilities. I agree for myself, my pet(s) and my guests and invitees to assume the risks and hazards that may be expected to arise from such activities, uses and interaction with other animals. I agree that Hounds on the Hudson 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 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 Hounds on the Hudson for any and all costs, damages, claims or expenses that may result therefrom. I further acknowledge that Hounds on the Hudson shall not be held responsible for any illness or ailment that may affect my pet during its visit or stay at Hounds on the Hudson and will indemnify and hold Hounds on the Hudson 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 Hounds on the Hudson harmless for any costs, damages or expenses that we may incur from our use of the Hounds on the Hudson 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 Hounds on the Hudson or any of its employees, officers, agents or business invitees for costs, 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 Hounds on the Hudson.

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 Hounds of the Hudson 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 Hounds on the Hudson facilities and services. I authorize Hounds on the Hudson 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 Hounds on the Hudson to require immediate veterinary attention, Hounds on the Hudson is hereby authorized to consult with my veterinarian. If my veterinarian is unavailable or located at too great of a distance, Hounds on the Hudson 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 Hounds on the Hudson, 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 Hounds on the Hudson.

I agree that the names and likenesses of my, my pet(s) my guests and invitees may appear in Hounds of the Hudson 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 Hounds of the Hudson website from time to time.

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: _____.