



DOG BOARDING AGREEMENT



OWNER & DOG INFORMATION

OWNER NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CELL PHONE _____ SECONDARY PHONE _____

EMAIL _____

EMERGENCY CONTACT

NAME _____ RELATIONSHIP _____

PHONE _____ AUTHORIZED TO PICK UP DOG? ☐ YES ☐ NO

DOG INFORMATION

DOG'S NAME _____ BREED _____

AGE _____ SEX ☐ MALE ☐ FEMALE SPAYED/NEUTERED ☐ YES ☐ NO

WEIGHT _____ LBS COLORS/MARKINGS _____

FEEDING INSTRUCTIONS

FOOD BRAND/TYPE _____

AMOUNT _____ TIMES PER DAY _____

TREATS ALLOWED? ☐ YES ☐ NO

IF YES, WHAT? _____

SPECIAL DIET/NOTES _____

HEALTH INFORMATION

ALLERGIES _____

MEDICAL CONDITIONS _____

NOTES _____

BEHAVIOR INFORMATION

FRIENDLY WITH OTHER DOGS? ☐ YES ☐ NO

FRIENDLY WITH PEOPLE? ☐ YES ☐ NO

ANY HISTORY OF AGGRESSION, BITING, ESCAPING, OR OTHER BEHAVIOR WE SHOULD KNOW ABOUT? _____

MEDICATIONS

MEDICATION NAME _____

DOSAGE _____ TIMES PER DAY _____

SPECIAL INSTRUCTIONS _____

MEDICATION NAME _____

DOSAGE _____ TIMES PER DAY _____

SPECIAL INSTRUCTIONS _____



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BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS OUTLINED BELOW.



1. ASSUMPTION OF RISK

I UNDERSTAND THAT BOARDING DOGS INVOLVES INHERENT RISKS, INCLUDING BUT NOT LIMITED TO ILLNESS, INJURY, ESCAPE, STRESS, AND INTERACTIONS WITH OTHER DOGS.



2. OWNER CERTIFICATION

I CERTIFY THAT MY DOG IS HEALTHY, FREE OF CONTAGIOUS ILLNESS, CURRENT ON ALL REQUIRED VACCINATIONS, AND HAS NOT SHOWN AGGRESSION TOWARD PEOPLE OR OTHER ANIMALS UNLESS DISCLOSED.



3. EMERGENCY VETERINARY CARE

IF MY DOG BECOMES ILL OR INJURED, I AUTHORIZE ARCADIA DOG RANCH TO OBTAIN VETERINARY CARE AS NEEDED. EVERY REASONABLE EFFORT WILL BE MADE TO CONTACT ME FIRST. I AM RESPONSIBLE FOR ALL VETERINARY EXPENSES.



4. LIABILITY

I AGREE THAT ARCADIA DOG RANCH, ITS OWNERS, STAFF AND VOLUNTEERS, ARE NOT LIABLE FOR ANY INJURY, ILLNESS, DEATH, ESCAPE, OR LOSS OF MY DOG, EXCEPT IN THE CASE OF PROVEN NEGLIGENCE.



5. GROUP PLAY

MY DOG MAY PARTICIPATE IN GROUP PLAY. IF MY DOG CANNOT SAFELY PARTICIPATE, ARCADIA DOG RANCH MAY SEPARATE MY DOG OR PROVIDE INDIVIDUAL ACCOMMODATIONS.



6. PAYMENT

PAYMENT IS DUE AT PICKUP. I AGREE TO PAY ALL FEES, INCLUDING LATE PICKUP FEES, HOLIDAY SURCHARGES, RETURNED CHECK FEES, AND ANY COLLECTION COSTS OR ATTORNEY FEES IF APPLICABLE.



7. CANCELLATION POLICY

RESERVATIONS CANCELED WITH LESS THAN 48 HOURS NOTICE WILL BE CHARGED FOR THE FIRST NIGHT. HOLIDAY RESERVATIONS ARE NON-REFUNDABLE.



8. ABANDONED PETS

IF A DOG IS NOT PICKED UP WITHIN THREE (3) DAYS OF THE SCHEDULED DEPARTURE DATE AND NO COMMUNICATION HAS BEEN RECEIVED, ARCADIA DOG RANCH RESERVES THE RIGHT TO PURSUE ALL REMEDIES AVAILABLE UNDER WASHINGTON LAW, INCLUDING CHARGING ADDITIONAL BOARDING FEES AND TRANSFERRING THE DOG TO THE APPROPRIATE AUTHORITIES IF NECESSARY.



9. PHOTO RELEASE

I GRANT ARCADIA DOG RANCH PERMISSION TO PHOTOGRAPH OR VIDEO MY DOG FOR MARKETING, WEBSITE AND SOCIAL MEDIA PURPOSES. ☐ YES ☐ NO

OWNER PRINTED NAME _____ DATE _____

OWNER SIGNATURE _____

ARCADIA
DOG RANCH