



# Doggy Enrollment Form

*We're so dog gone paw-leased you picked us!*

Canine Parent Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*Please Parent Contact numbers with contact's name below (Emergency Contacts are listed further down):*

Contact #1: \_\_\_\_\_ Contact #2: \_\_\_\_\_

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

Canine's Name \_\_\_\_\_ Birth Day \_\_\_\_/\_\_\_\_/\_\_\_\_ Approx. Weight \_\_\_\_ lbs.

Sex:  Female  Male Color \_\_\_\_\_ Breed Type \_\_\_\_\_

Yes, My Canine is Spayed/Neutered  No, My Canine is not spayed/neutered (**required by 8 months of age**)

Additional Canine's name \_\_\_\_\_ Birth Day \_\_\_\_/\_\_\_\_/\_\_\_\_ Approx. Weight \_\_\_\_ lbs.

Sex:  Female  Male Color \_\_\_\_\_ Breed Type \_\_\_\_\_

Yes, My Canine is Spayed/Neutered  No, My Canine is not spayed/neutered (**required by 8 months of age**)

Additional Canine's name \_\_\_\_\_ Birth Day \_\_\_\_/\_\_\_\_/\_\_\_\_ Approx. Weight \_\_\_\_ lbs.

Sex:  Female  Male Color \_\_\_\_\_ Breed Type \_\_\_\_\_

Yes, My Canine is Spayed/Neutered  No, My Canine is not spayed/neutered (**required by 8 months of age**)

Veterinarian Hospital \_\_\_\_\_ Phone # \_\_\_\_\_

**REQUIREMENTS: Campers must have veterinary proof of current and updated Rabies, Distemper, and Bordetella vaccinations. Per state requirements, we cannot accept self-administered shots.**

**EMERGENCY CONTACT INFO (someone not traveling with you):**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact Number \_\_\_\_\_

**FEEDINGS: To ensure a more comfortable stay, while not required, pre-bagging your pet's food helps our staff confirm we have the correct amount on hand, to be given at specified times listed below.**

Food Brand Name: \_\_\_\_\_

Quantity: \_\_\_\_\_ Feeding Schedule (i.e. 2 or 3 times per day): \_\_\_\_\_

Additional Feeding Directions: \_\_\_\_\_

**Any Allergies** we should be aware of: \_\_\_\_\_

**MEDICATIONS: All medication must be in original packaging.**

Medication Name: \_\_\_\_\_ Quantity: \_\_\_\_\_

Instructions: \_\_\_\_\_

Medication Name: \_\_\_\_\_ Quantity: \_\_\_\_\_

Instructions: \_\_\_\_\_



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Canine Behavior: (Please answer the following questions as truthfully and as accurately as possible.)

- 🐾 Does your dog show any signs of aggression? *i.e. people/dogs, food/water, being touched/body issues* (Y/N) \_\_\_\_\_  
If Yes, Please describe \_\_\_\_\_
- 🐾 Other issues of concern/fear? *i.e. sudden movement/touching/collar* (Y/N) \_\_\_\_\_  
If yes, please describe: \_\_\_\_\_
- 🐾 Does your dog take behavior modification medication? *i.e. anxiety/hyper activity* (Y/N) \_\_\_\_\_  
If yes, please describe: \_\_\_\_\_
- 🐾 Has your dog ever jumped a fence or showed fence aggression? (Y/N) \_\_\_\_\_  
If yes, please describe: \_\_\_\_\_
- 🐾 Has your dog ever socialized with other dogs or ever used doggy daycare/boarding services? (Y/N) \_\_\_\_\_
- 🐾 Are there any restrictions that should be placed on your dog's activities? (Y/N) \_\_\_\_\_  
If yes, please describe \_\_\_\_\_
- 🐾 Is your dog a recent rescue? *This is help us understand their background* (Y/N) \_\_\_\_\_
- 🐾 Is there anything else we should know about your dog? \_\_\_\_\_  
\_\_\_\_\_

How did you hear about Camp Happy Hound? (Please circle all that apply)

Drive-By    Facebook    Website    Special Event    Vet    Current Happy Hound'er\*    Other \_\_\_\_\_

**\*Referral:** Please list the first and last name (canine or human) of who referred you and your pup(s). They will receive a

**Free Day of Daycare** after your first *paid* visit! \_\_\_\_\_

I, \_\_\_\_\_, agree that all information specified in this Doggy Enrollment form is accurate to the best of my understanding and that I have received, read, and signed Camp Happy Hound's Policies and Procedures (following page). I hereby agree that my signature is sufficient for this Enrollment, on behalf of any other owner or representative.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



CANINE CAMPER'S NAME: \_\_\_\_\_

READ CAREFULLY THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE CHH AND RELATED PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT.

**Camp Policies, Procedures and Camper Release, Waiver of Liability, Assumption of Risk and Indemnification Agreement.** In consideration for my dog being permitted to be a client at Camp Happy Hound for daycare or overnight boarding, I make the following representation and agree to all of the following policies, procedures, terms, and conditions:

- 1. CAMPER REQUIREMENTS.** My canine meets the following "camper requirements" he/she (a) has successfully completed the evaluation interview, (b) is four (4) months of age or older, (c) he/she is spayed or neutered (by the end of their 8<sup>th</sup> month), (d) is current on his/her Rabies, Distemper, and Bordetella vaccinations, (e) is in good general health and free of ticks and fleas, (f) meets all other municipal or state licensure and other requirements, and (g) is attending Camp Happy Hound with a quick release collar. My canine must enter and exit the Camp Happy Hound facility on a non-retractable, "traditional" walking leash.
- 2. AGGRESSIVE DOGS.** Although Camp Happy Hound loves all dogs, I understand that aggressive dogs are not permitted to attend Camp Happy Hound and that if my canine acts aggressively or exhibits unacceptable behavior he/she may be separated from the other dogs and/or dismissed from Camp Happy Hound. Such determinations shall be made at the sole discretion of Camp Happy Hound. I also understand that if my canine starts showing signs of exhaustion/aggression/unprovoked behavior, I will be notified and accept any and all determinations that Camp Happy Hound shall make.
- 3. PERSONAL PROPERTY.** I agree that Camp Happy Hound shall not be responsible or liable for any lost or damaged personal property belonging either to me or my canine. I also understand and agree that my dog's harness will be removed and need to be replaced with a quick-release collar, in the play area to prevent injury to any dog. If my dog causes any damage to the Camp Happy Hound facilities or equipment, I agree to be fully responsible for the full cost of any repair or replacement.
- 4. CANCELLATION POLICY.** I understand that I could be held responsible for paying for a full-night of boarding, if I fail to cancel my boarding reservation at least forty-eight (48) hours in advance. If I fail to cancel a second reservation for boarding, I understand that I will forever be charged a 20% deposit fee for holding all future boarding dates.
- 5. REFUNDS.** Camp Happy Hound's refund policy is available upon request.
- 6. VACCINATIONS AND MEDICATIONS.** I understand that all dogs must be vaccinated to attend Camp Happy Hound. All dogs must have up to date records of RABIES, BORDETELLA, and DISTEMPER shots. All vaccinations must be given and recorded by a licensed veterinarian. Self-administered shot records will not be accepted. Camp Happy Hound MUST have updated shot records on file before providing any daycare or boarding opportunities. Any medication(s) given while at Camp Happy Hound must be in original packaging, with correct dosages and times given.
- 7. ABANDONED DOGS.** Camp Happy Hound is a place where all dogs are loved and can play. No canine may be abandoned at Camp Happy Hound. I agree that I will not neglect to pick up my canine from Camp Happy Hound by the time he/she is scheduled to leave without providing notification. Any canine that is left at Camp Happy Hound without any contact, instruction or notification from me, of the ability, willingness or plans to pick him/her up by myself or my personal representative, will be considered abandoned upon the FIFTH business day of such notification failure. I understand that if I abandon my canine at Camp Happy Hound, Camp Happy Hound will, by default, become the legal owner and guardian of the canine. I FULLY UNDERSTAND AND AGREE THAT IF I ABANDON MY DOG AT CAMP HAPPY HOUND, I MAY BE UNABLE TO RETRIEVE POSSESSION OF MY DOG AND WILL HAVE NO RECOURSE AGAINST CAMP HAPPY HOUND AS PROVIDED FOR BELOW.
- 8. DUTY TO DISCLOSE.** I have disclosed and shall continue to disclose any and all medical or other conditions, including but not limited to personality concerns or behaviors that may affect, limit or prevent my canine's ability to participate in play time or otherwise attend Camp Happy Hound as a client.
- 9. ACCEPTANCE AND ACKNOWLEDGEMENT OF CAMP PARTICIPATION RISK.** I FULLY UNDERSTAND THAT: (a) there are potential risks involved with interactions between humans and dogs, as well as, between dogs and other dogs, which may result in property damage or bodily injury and (b) there may be other risks not known to me nor readily foreseeable at this time (collectively, "risks").

\_\_\_\_\_ I FULLY ACCEPT AND ASSUME ALL RISKS AND RESPONSIBILITY FOR ALL RISKS, WITHOUT LIMITATION, ALL LOSSES, COSTS\* AND DAMAGES OCCURRED, AS A RESULT OF MY CANINE'S PARTICIPATION AT CAMP HAPPY HOUND; INCLUDING ANY VETERINARIAN EXPENSES OCCURRED ON BEHALF OF MY DOG.  
\*CAMP HAPPY HOUND WILL CONSIDER AND DETERMINE HOW COSTS ARE SETTLED DURING AND AFTER ANY SUCH RISKS.

**10. VETERINARIAN LIABILITIES AND CARE.** I agree to allow Camp Happy Hound to obtain medical treatment for my canine, if, in its sole discretion it appears that, he/she is ill, injured or exhibits any other behavior that would reasonably suggest that my canine may need medical treatment.

\_\_\_\_\_ I AGREE THAT I AM FULLY RESPONSIBLE FOR THE COST OF ANY SUCH MEDICAL TREATMENT, AND FOR THE COST OF ANY TRANSPORTATION FOR THE PURPOSES OF SUCH TREATMENT, PROVIDED TO MY CANINE OR OTHER CANINE, IF CARE IS NEEDED, AT THE FAULT OF MY CANINE.

**11. WAIVER, RELEASE, AND INDEMNIFICATION.** I HEREBY, WAIVE, DISCHARGE CLAIMS, RELEASE FROM LIABILITY, PROTECT AND DEFEND, AND PLEDGE NOT TO USE CAMP HAPPY HOUND, from and against any and all INJURY, LIABILITY, CLAIMS, LITIGATION, ACTIONS, COSTS, LOSSES, DAMAGES, EXPENSES OR DEMANDS (including reasonable attorney's fees) OF EVERY CHARACTER WHATSOEVER on account of or resulting from or relating in any way to (a) any act or omission of the releases, including negligence, and (b) my or my canine's participation in activities at Camp Happy Hound, or otherwise. I AGREE that this Release shall be BINDING ON ME and my heirs, legal representatives, and assigns. I ALSO EXPRESSLY AND FOREVER RELEASE CAMP HAPPY HOUND from any duty to protect me or my dog(s) from injury or any kind, and AGREE that even if CAMP HAPPY HOUND chooses to implement safety precautions, such actions shall NOT alter the fact that I HAVE RELEASED CAMP HAPPY HOUND FROM ANY DUTY TO PROTECT ME OR MY DOG(S).

I HAVE READ AND FULLY UNDERSTAND the terms of this "CAMP POLICIES, PROCEDURES AND CAMPER RELEASE AGREEMENT" and understand that I have given up all rights by initialing above and signing the below contract.

\_\_\_\_\_  
Canine Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Camp Happy Hound Representative