

ONSITE SLEEP OVER

Name _____ Breed _____

Colour _____ Male Female

Desexed Yes No DOB _____

Date Of Last C5 Vaccination _____ (Must be shown proof)

Vet Details Clinic _____ Vets Name _____

Address _____ Phone _____

My Dog is...

Deflead Yes No Treated for Heartworm Yes No

Dewormed Yes No

Is your dog Microchipped Yes No M/C Number _____

Is your dog on any medication? Yes No (Please provide Rates & Dosage)

Are there any side affects we should be aware of? _____

Has your dog ever had a reaction to medication? Yes No If Yes please describe medication & reactions

Has your dog been to the vet in the last 12 months besides for an annual health check / vaccination? Yes No

If so please describe _____

Does your dog have any allergies Yes No Please Detail _____

What does your dog's diet consist of? _____

Does your dog have any dietary requirements? Yes No If yes please detail _____

Please check your dogs feeding routine

Morning Afternoon Evening

Describe your dogs feeding quantities _____

Does your dog sleep Inside Outside. If inside, normal sleeping place _____

Please list any other details that Onsite Pets may need to know about your dog

How does your dog interact with other dogs? _____

How often does your dog get to interact with other dogs?

Daily Weekly Other

Is/Does your dog display any of the following?

Hyper Yes No Shy Yes No Fearful Yes No Destructive Yes No

Stubborn Yes No Mounts Dogs Yes No Mounts People Yes No Chase Things Yes No

Pushy Yes No Protective Yes No Excessive Barking Yes No Mouthing/Biting Yes No

Jump Fences Yes No Separation Anxiety Yes No

Other _____

Does your dog display any concerning behaviour around other dogs, people or children? Yes No

Has your dog ever been involved in a dog fight? Yes No If Yes Please Detail _____

Has your dog ever bitten anyone? Yes No If Yes Please Detail _____

Has your dog ever escaped from your home? Yes No

Is your dog anxious, does it fret for its owner / home, or has separation related issues? Yes No

Has your dog attended a boarding kennel, minding facility? Yes No

What is the longest duration your dog has been away from you? _____

How often do you walk your dog?

Daily 2-3 Times Weekly Weekly Other _____

How long is a typical exercise session for your dog?

20min

30min

40min

50min

1hr

Other

Is your dog allowed of lead? Yes No

If Yes what is there recall like? _____

Does your dog enjoy going to the beach? Yes No

Does your dog have any skin conditions? _____

Has your dog interacted/seen a cat? Yes No If Yes how did they react? _____

Please list any other details that may make your pooches stay more enjoyable

Name _____ Address _____

Home Phone _____ Work _____

Mobile _____ Email Address _____

EMERGENCY CONTACTS

Emergency 1.

Emergency 2.

Name _____ Name _____

Relation _____ Relation _____

Phone _____ Phone _____

Mobile _____ Mobile _____

Are you contactable whilst you are away? Yes No

Best contact number & email whilst you're away

Any other emergency contact information your Onsite carer may need to know

Owner's Confirmation:

I confirm that all details provided are true & correct. I understand if there are any changes to this information I will notify Onsite Pet Care prior to my next stay.

Name _____ Sign _____ Date _____

TERMS & CONDITION

I agree, that upon commencement of my dogs sleepover, he/she is healthy and sociable (unless otherwise mentioned / consulted with HHPG staff). I agree that his/her coat is in good and maintained condition. I agree to pay grooming costs should my dog require a groom to ensure his/her coat is able to be maintained by my carer. I understand that Hairy Hounds Playground (HHPG) only accept dogs of 10 weeks of age or older, with proof of current C5 vaccinations and that dogs who are 8 months or older must be spayed/neutered. For 7 day stays, a cancellation fee of one night is applicable where at least 48 hour notice is not provided. In the event of a cancellation for stays from 8 - 20 days, a 2 night cancellation fee will be charged. 21 day stays will incur a 3 night cancellation fee. If a cancellation is made with less than 48 hours notice, I understand I am not entitled to a refund. I understand that HHPG is a cage free environment and that dogs will interact with other dogs off leash. I understand that my dog/s may receive an accidental injury in play and agree that HHPG will not be held liable for such injuries. If my dog displays any sign of aggression or excessive barking whilst at your carers home, HHPG has the right to terminate the contract and request the owner/emergency contact to collect the dog within 24 hours. HHPG will provide me with a refund of any monies in credit in this situation. In the event of a minor injury to the dog, staff will apply first aid treatment to the dog and I / my emergency contact will be notified. In the event of a serious injury, HHPG will contact me / my emergency contact asap and make arrangement with (where possible) my nominated vet to seek advice or treatment. I agree to pay all costs and charges for special services requested and all veterinary costs for your dog during the time he/she is in HHPG's care. In the event of an emergency whereby immediate treatment is required, HHPG will transport the dog to the University of Melbourne Veterinary Clinic in Werribee, The Animal Accident Emergency Centre in Essendon or Advanced Vet Care in Kensington. I agree to be fully responsible for all treatment and veterinary costs. I agree to be solely responsible for any and all acts or behaviour of my dog while it is in HHPG care. In the event that my dog causes injury to another dog, I will be liable for any costs, fees, or damages sought by HHPG or a third party. I indemnify HHPG and keep HHPG indemnified against all claims by owners of other dogs. If the dog displays any sign of injury or illness when the dog is being dropped off, I understand HHPG may refuse entry to avoid any transfers to other dogs. I accept that HHPG fees are to be paid in advance or on arrival of scheduled visit, if the fee is not paid on the day, I understand that the dog may not be left in HHPG's care. HHPG accept cash or bank transfer (no cheques) and have eftpos facilities on site. I understand that my carer will take all due care with my dog's health and safety, at all times. My dog will only allowed off leash when visiting Hairy Hounds Playground or in an off leash area. My carer understands their legal obligations as a 'dog owner' and agrees that my dog will live in a manner in which they are accustomed to in their own home.

I, the Owner of _____ have read the above terms & conditions and I agree to the above terms & conditions.

Sign _____ Date _____

I the Carer of / HHPG representative, have read the above Terms & Conditions and I agree to the above Terms & Conditions.

Sign _____ Date _____