

DAYCARE AND BOARDING MEMBERSHIP

OWNER PROFILE

Owner #1, First Name _____

Last _____

Phone, Home _____ Cell _____

E-mail _____

Address, City, Province, Postal Code _____

Owner #2, First Name _____

Last _____

Phone, Home _____ Cell _____

E-mail _____

Address, City, Province, Postal Code _____

How did you hear about us? If a current client, please give name?

Emergency Contact/Alternate Pick Up Party Name & Phone Number

DOG(S) PROFILE(S)

1. Dog's Name _____ D.O.B _____

Sex? M / F Altered? Y / N

Breed _____ Color _____

Weight _____

Where and when did you get you dog?

2. Dog's Name _____ D.O.B _____

Sex? M / F Altered? Y / N

Breed _____ Color _____

Weight _____

Where and when did you get your dog?

HEALTH AND BEHAVIOR SPECIFICATIONS

Has/have your dog(s) ever had kennel cough? Y/ N

If yes, when? _____

Has/have your dog(s) been ill in the last 30 days? Y/N

If yes, explain _____

Does/do your dog(s) have any medical or behavioral conditions?

Does/do your dog(s) have any allergies? Y /N

If yes, please list and describe _____

Has/have your dog(s) ever attended daycare or boarding? Y/ N

If yes, where and when

How often does/do your dog(s) spend time with other dogs? Never | Sometimes | All the time

How often does/do your dog(s) go to the dog park? Never | Sometimes | All the time

What situations may cause your dog(s) to become aggravated (circle any that apply):

Grabbing collar / Hugging / Removing from furniture / Touching while sleeping / Bathing /
Guarding food/toys

Brushing / Nail trimming / Touching ears/paws/mouth/tail / Around other dogs / Other / None

Describe if your dog(s) displays aggressive behavior (circle all that apply):

Will bite / May bite / Growls / Snaps / Shows teeth / Freezes / Trembles / Moves away

Has/have your dog(s) ever bitten another dog? Y/ N

If yes, did the bite puncture/tear the skin? Y/ N

Has/have your dog(s) ever bitten a person? Y /N

If yes, explain If yes, did the bite puncture/tear the skin? Y/ N

If your dog is/are under 25 pounds, are they allowed to play with the large dog group? Y /N

Signature _____ Date _____

GENERAL FEEDING INFORMATION

Does/do your dog(s) eat or chew on bedding? Y /N

Is/are your dog(s) on medication? Y /N

What? _____

How much is your dog fed per day? _____

What brand and type? _____

At feeding times, how does/do your dog(s) tend to eat? Slow | Medium | Fast

Please note: Upon boarding check-in you will be required to verbally review your feeding, bedding, and pick up instructions every time.

Circle the eating habits that best describe your dog(s):

- Eats all food at mealtime

-Grazes throughout day

-Goes for periods without eating

-Requires more enticing food to be mixed in to eat

If your dog(s) has/have an upset stomach, can we feed them a bland diet (white rice, broth, pumpkin) to settle their tummy? Y/ N

Can we give your dog treats? Y/N

Grain Free Only? Y/N

Can we give your dog stuffed kongs? Y /N

Toys? Y/N

Check one:

_____ If my dog(s) is/are out of food, please buy more and I will reimburse Winter Hill Canine Cottage for the cost of the food and pay an additional \$10.00 trip fee.

_____ If my dog(s) is/are out of food, **please feed **house food**** and I will pay an additional \$1.00 per cup of food as needed.

_____ If my dog(s) is/are out of food, **please feed **grain free food**** and I will pay and additional \$2.00 per cup of food as needed.

If you have multiple dogs, can they eat in the same suite together? Y/ N

Does/do your dog(s) have a history of eating poop or otherwise abnormal objects? Y/ N

Other Information:

Please initial each clause:

_____ **ILLNESS:** If your dog(s) becomes ill during their stay at Winter Hill Canine Cottage, we will make every attempt to reach you and/or your emergency contact, however, this may not be possible. If Winter Hill Canine Cottage takes your dog(s) to the veterinarian there will be a \$20.00 trip charge in addition to all veterinary fees. We reserve the right to take your dog(s) to the veterinarian of our choice.

_____ **DROP-OFF AND PICK-UP:** All dogs must be dropped off OR picked up between 8:00am and 9:30am OR 4:30pm and 6:00pm Monday-Sunday. Dogs are welcome to stay for daycare on the day of pick up for an additional \$15. Any dog that is not picked up by 6:00 PM on Monday-Sunday, unless prior arrangements have been made, will be boarded at the rate of whatever room is available. Late fees will be charged in 10-minute increments up to 30 minutes after close, and then all doors will be locked. Please be on time.

Please list any special phrases or words your dog knows to help us better communicate with them. (“go pee”, “stop barking”, “leave it” etc.)

Any other info

WINTER HILL CANINE COTTAGE DAYCARE AND BOARDING CONTRACT

Please read each statement and initial.

____ I/We have read, understand, and agree with this Daycare and Boarding Contract.

____ I/We have read and understand the attached Rules and Regulations and agree to abide by them.

____ I/We accepts all of the terms, conditions and statements of the attached Daycare/Boarding Agreement and Release.

____ If any of my or my dog’s information changes, I will provide written notice to Winter Hill Canine Cottage.

____ All dogs must be dog tolerant and people friendly. Dogs that are in a play group must be non-aggressive and non-protective of food and toys. If we determine at any time that a dog’s behavior is aggressive, we reserve the right to dismiss him/her from social daycare/boarding at our own discretion. Any and all history of aggressive, protective, or otherwise dangerous behavior has and will be disclosed to Winter Hill Canine Cottage prior to any and all services provided by our employees.

____ If your dog eliminates on the grounds outside of Winter Hill Canine Cottage, please clean up and deposit in the appropriate receptacles.

All dogs must arrive and leave on a leash. They must also wear a flat, nylon, quick release collar preferably with tags. Winter Hill Canine Cottage staff may remove the collar for safety reasons. All rubber and leather collars or non-quick release collars should be replaced for daycare and boarding.

____ All dogs must be in good health, physically sound, and adequately protected from disease. All male dogs over 12 months must be neutered. Females that are intact are not allowed at Winter Hill Canine Cottage while in season but can come to Winter Hill Canine Cottage at all other times.

____ All dogs must be relatively clean, brushed, and flea free. If your dog has fleas, Winter Hill Canine Cottage will isolate your dog and contact you to arrange a flea bath at your expense or you must pick up your dog.

____ I/We have read and understand these Rules and Regulations and agree to abide by them.

OWNER’S SIGNATURE _____ DATE _____

WINTER HILL CANINE COTTAGE REPRESENTATIVE
SIGNATURE _____ DATE _____

WINTER HILL CANINE COTTAGE CANCELLATION POLICY

Please read each statement and initial.

_____ Cancellations to any portion of a boarding reservation during non-peak times must be made no later than 48 hours in advance of arrival date. Cancellations made with less than a 48-hour notice will incur a charge equal to the amount of a two-night stay. If more than one type of room is reserved the charge will be for the more expensive room. If the reservation is only for one night, the charge will only be for one night.

_____ A seven-day notice will apply for cancellations made for all reservations during peak times and for all extended stays. Any cancellations or alteration of a reservation must be made seven days in advance of the arrival date. When the seven-day notice applies, any cancellation made with less than seven days' notice will incur a charge equal to the amount of two night stay.

_____ Peak times include, but are not limited to, all reservations that include a STAT Holiday weekend, Spring Break week, and December 18th-January 3rd. There is a minimum two-night stay required for Christmas Day boarding.

_____ I/We understand that it is my/our responsibility to verify if my/our reservation is during a peak time when the reservation is made.

_____ A seven-day notice will always apply to extended stays. An extended stay is considered to be any reservation that is for more than seven nights.

_____ Cancellations to daycare reservations must be made by the end of the business day the day before arrival.

_____ In addition, I understand that my/our credit card, saved on file, will be charged if I/we do not cancel my/our reservation with adequate notice. Otherwise, the credit card information will only be used to hold the reservation. Payment accepted on pick up is cash, cheque or e-transfer.

_____ I/We have read and understand this Cancellation Policy and agree to abide by it.

OWNER'S SIGNATURE _____ DATE _____

WINTER HILL CANINE COTTAGE REPRESENTATIVE
SIGNATURE _____ DATE _____

WINTER HILL CANINE COTTAGE DAYCARE/BOARDING AGREEMENT & RELEASE

Please read each statement and initial.

_____ Owner/Guardian authorize use of the Dog's visual image(s) and statements in newsletters, website, posters, and other materials.

_____ In consideration of being permitted to use the services and facilities of Winter Hill Canine Cottage in Guelph/Eramosa, Ontario, I/We, the undersigned owner(s), hereby release, waive, and discharge Winter Hill Canine Cottage and its staff, sub-contractors, and volunteers from all liability for any and all loss or damage, and any claim or damages resulting there from, on account of injury, loss, damage, ailment, or disease to my/our dog(s), even resulting in death, excepting intentional or gross negligence, while my/our dog(s) is/are under the care of Winter Hill Canine Cottage.

_____ I/We agree to indemnify Winter Hill Canine Cottage, its staff, sub-contractors and volunteers from any loss, liability, damage or cost they may incur, excepting intentional or gross negligence, due to my/our presence or the presence of my/our dog(s) in or upon Winter Hill Canine Cottage's premises and while my/our dog(s) is/are under the care of Winter Hill Canine Cottage.

_____ I/We hereby assume full responsibility for any harm or damage caused by my/our dog(s) while in or upon Winter Hill Canine Cottage's premises and while my/our dog(s) is/are under the care of Winter Hill Canine Cottage.

_____ I/We further understand and agree that in admitting my/our dog(s) to Winter Hill Canine Cottage, the operators of Winter Hill Canine Cottage have relied on my/our representation that my/our dog(s) is/are in good health and has/have not harmed or shown aggression or threatening behavior toward any person or any other dog.

_____ I/We further understand that any problem, including but not limited to injury and illness, that develops with my/our dog(s) will be treated as deemed best by the staff of Winter Hill Canine Cottage in their sole discretion, and that I/We assumed full financial responsibility for any and all expenses involved, and that I/We hereby agree to indemnify Winter Hill Canine Cottage, staff, subcontractors, and volunteers for any expenses incurred for such treatment.

_____ I/We understand that all fees are non-refundable for any reason.

_____ I/We have read and understand the attached Rules and Regulations and Cancellation Policy and agree to abide by them.

_____ I/We accept all the terms, conditions and statements of this Agreement and Release.

OWNER'S SIGNATURE _____ DATE _____

WINTER HILL CANINE COTTAGE REPRESENTATIVE

SIGNATURE _____ DATE _____