



Red Barn Pet Resort, LLC

1389 Van Davis Rd. NW

Charleston, TN 37310

Dog Boarding Contract

Please read this agreement in its entirety before signing.

Pet's Name _____ Gender _____ Age _____

Check-in Date and Time _____ Check-out Date and Time _____

Note: Check-in/Check-out Times are by appointment only.

Pet Owner _____

Street Address _____

City, State, ZIP _____

Best Phone Number _____

Emergency contact and phone # if we cannot reach you _____

E-mail Address _____

Breed _____ Spayed/Neutered? _____ Weight _____

Is pet currently taking any medications? ___Yes ___No **NOTE: We are NOT veterinarians. Pet parent specifically agrees that Red Barn Pet Resort will not be held responsible for any medication errors or issues.**

Pet's Veterinarian _____ Phone # _____

VETERINARY CHECKLIST- A printout or letter from your veterinarian is required showing that your pet is up to date on the following:

- Current Bordetella Vaccination (Kennel Cough within the past 6 months)
- Current DHLPP Vaccination (Distemper, Hepatitis, Leptospirosis, Parvovirus, Parainfluenza)
- Current Rabies Vaccination

_____ (Initial and date)

Does pet climb? _____

Is your pet escape-oriented? _____

Has your pet been boarded before, and if so, when? _____

Were there any problems while boarding? _____

Does pet bark excessively or show signs of separation anxiety? _____

Has pet ever shown aggression towards people or other animals (growling, snapping, biting, etc.)? _____

Please note that if your dog bites/injures another animal or a person while in our care, you will be liable. For the safety of our caregivers and our other guests, we keep aggressive pets isolated in their kennel.

Has your pet suffered from any illness in the past 30 days? If yes, please explain: _____

Will your pet require the administration of any medications? _____

Does your pet have any allergies? _____

Is there anything special you would like us to know about your pet? _____

OWNER HEREBY ACKNOWLEDGES HAVING READ, UNDERSTOOD AND RECEIVED A COPY OF THIS AGREEMENT.

Owner Name (Please print) _____

Signature: _____

Date: _____

RBPR Representative: _____

Date: _____

_____ (Initial and date)

Boarding Waiver and Consent Form

This agreement shall apply to all boarding visits by your pet to Red Barn Pet Resort.

Please initial next to every point to indicate that you have read and understand.

I represent that I am the legal owner or authorized by the owner of the pet. _____

I understand that as a requirement, when visiting Red Barn Pet Resort, my pet must be properly restrained.

I represent that my pet is in good health, is currently up to date on all vaccinations. Is free of fleas, ticks, and lice and has not been ill within the last 30 days. I agree that if my pet does have fleas and/or ticks, that Red Barn Pet Resort is allowed to bathe, isolate, and treat and should this occur, I am responsible for the additional costs. _____

I understand that while my pet is fully vaccinated, that vaccines are not guaranteed and there is a small risk that my pet may contact a contagious disease or illness. I agree that should this occur, I am responsible for my own pet’s care, medical attention and costs. _____

I release Red Barn Pet Resort, its staff, owners, and any representatives from any and all liability which I or my pet may suffer including but not limited to injury, sickness, damage, or death resulting from participation in daycare and boarding. _____

I understand that although all pets are fully supervised, incidents of injuries may occur from playing with other pets, which includes but not limited to bites, scrapes, scratches, and sprains. _____

I understand that in the event that my pet does jump or climb over any fencing or enclosure, I hereby release Red Barn Pet Resort, its staff, and its owners from any and all liability and agree to pay for any resulting damages or injury to other animals, people or property. _____

I understand that Red Barn Pet Resort reserves the right to remove my pet from the play area and place them in a separate holding area should my pet display any undesirable behaviors. “Undesirable behaviors” shall be defined solely by RBPR. _____

I allow Red Barn Pet Resort’s staff to contact my veterinarian should any injuries or illness require medical attention. I agree that I am solely responsible for any medical expenses incurred for my pet. _____

In the event that I or my authorized contact cannot pick up my pet at the agreed pick-up time, I authorize Red Barn Pet Resort to provide additional overnight and daycare services at my expense. _____

During the holidays and holiday weekends (New Years, Easter, Memorial Day, 4th of July, Labor Day, Thanksgiving, Christmas) Red Barn Pet Resort requires a 2-day deposit to hold your pet’s place. You have 7 days before your drop-off date to cancel and get a full refund on your deposit. There is also a 2-day minimum stay during these holidays. _____

_____ (Initial and date)

I understand that Red Barn Pet Resort operates on a flexible appointment only schedule due to staffing and providing the best care for our guests. Once I set an appointment, it is my responsibility to remember it and/or communicate if it needs to change or be cancelled. Not doing so could incur additional charges. _____

Medical Release Form

This is a required form for all **Red Barn Pet Resort** participants receiving services.

First and foremost, the safety and well-being of your pet(s) is of the highest importance. Ensuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously. We do our best to have our pet parents screen for pre-existing health conditions, but some factors may be beyond our control. If a medical emergency arises while a pet is at our facility or participating in a service that we provide, it is imperative that we are immediately able to get them medical treatment at the closest available facility. We will call ahead to the veterinary offices in closest proximity geographically to us to insure they can handle the emergency present. Your pet will be rushed to the closest available facility for treatment, and you will be notified. We notify the owner after we have secured a medical treatment center for the animal to avoid delays that might be caused by emotion on the part of the owner. Our goal is to get your pet medical attention as quickly as humanly possible, and any distractions may interfere with that process.

For that reason, it is a requirement to have our pet parents sign this form.

I understand that in the even of a medical emergency that **Red Barn Pet Resort**, at its sole discretion, deems to need the immediate attention of a licensed veterinarian I authorize **Red Barn Pet Resort** to seek medical attention to the closest available veterinary facility. I further agree that I am financially responsible for any medical treatment my pet(s) received because of a medical emergency while attending services provided by **Red Barn Pet Resort**.

Signature of Owner: _____ Date: _____

Printed Name: _____

_____ (Initial and date)