

BOARDING CONTRACT

Open daily for boarding and PlayDay 8:30am-10:30am and 4pm-6pm by appointment only. No drop offs, pick ups or visits from 10:30am-4pm. Emergency off hour drop off or pick up – \$50

Pet's Name		Dog Cat Breed					
Altered? Yes No Age							
Check in Date/Time Check Out Date/Time							
Owner's Name Phone							
Address							
City	State	Z	ip	E-mail _			
Emergency Contact Please give a telephone number where we can reach you or the name of a person who can make decisions regarding your pet. Name							
Vaccination Dates: Dogs: DHLPP-C Vet			es	Cat	ts: FVRCP	Rabies	
Overnight Boarding: PlayDay:							
Dogs: Under 30 lbs. 30-50 lbs. 50-120 lbs. Over 120 lbs. Cats: \$30.00 per day	\$30.00 per day \$35.00 per day \$40.00 per day \$55.00 per day		Weekdays: 1 Small dog 2 Small dogs 1 Large dog 2 Large dogs	\$30.00 pe \$50.00 pe \$50.00 pe \$80.00 pe	r day r day	Sat, Sun & Holidays: \$50.00 per day \$80.00 per day \$60.00 per day \$100.00 per day	
			PlayDay Taxi	\$50		are considered small dogs. Activity or and manners will be evaluated for .	
Medications / Vitamins add \$1.00 per dose			 Multiple pet discounts Injections \$5.00 per shot Puppies not spayed / neutered add \$5.00 per day for pets that pose a risk or threat to staff or other pets 				
The check-in day is billed no matter what time you check in. If you pick up before 10:30am, there is no charge except for Sundays and holidays, which are always billed. Minimum billing is 2 days and holidays are a 3 day minimum.							
I hereby authorize Huck Finn Kennels to board my pet for the period of time noted above. Huck Finn Kennels agrees to provide a clean kennel for my pet and regular feeding as requested. Dogs will be exercised daily. If emergency care should become necessary for my pet, I authorize Huck Finn Kennels to obtain veterinarian services and agree to accept financial responsibility.							
In consideration of Huck Finn Ka actions against Huck Finn Kenn occur.							
I have verified that my pets are current on Rabies- DHPP-and Bordatella vaccines							
Owner/Agent Signature Date							