

Healthy Hounds & Fat Cats Enrollment Form

Human's Names (first & last)

1 _____ Cell Phone _____ Work _____
2 _____ Cell Phone _____ Work _____
Home Phone _____
Home Address _____ City _____ State _____ Zip _____
E Mail (you may receive reminders, coupons, or announcements) _____
Referred How? _____ (referrals = free day for the dog/parent who referred you!)
Emergency Contact Name _____ Relationship _____
Phone _____

Cat's Name _____ **Breed** _____ **Date of Birth** _____

Description _____ **Male or Female?** _____ **Spayed/Neutered?** _____

When was the last time your cat, growled at, bit, or scratched a human _____

Explain _____

When was the last time your cat growled at, bit, or scratched a partner cat _____

Explain _____

Please circle the appropriate items regarding your cat:

Shies away or nips when head/neck are touched

Reaction to strangers? Happy to see them Go away I don't like you Indifferent

Describe any behavior issues, idiosyncrasies or special sensitivities we should be aware of _____

Who else is authorized to pick up your cat? _____

Vet Clinic Name and phone # _____

List chronic health issues _____

Long term medications and dosage _____

Preferred brand/flavor of food if your pet has a sensitive stomach _____

Known allergies _____

****Please bring us copies of updated vaccination records whenever new ones are administered. ****

Customer's signature below binds Customer to all such statements and information provided in this Enrollment Form. By signature below, Customer further agrees to provide HHFC notice of any changes in the above information.

Signature: _____ Date: _____

PLEASE READ/INITIAL PAGE 2 (OVER) AND COMPLETE PAGE 3



RULES AND REGULATIONS

To ensure the safety and health of all animals and staff at HHFC, we require all clients to comply with the following Rules and Regulations. ****Please leave new pets in your vehicle until check in is complete!**** **Read and initial below:**

- All Cats over 6 months must be spayed/neutered.
- All cats must have written verification of up-to-date vaccinations recommended by your vet, including feline leukemia and rabies.
- Customer must certify their cats are in good health and have been free from any condition that could jeopardize other pets. If fleas or signs of fleas, lice or ticks are noticed at check in, your cat will not be admitted to the facility. This "spot check" is not exhaustive or conclusive, therefore, HHFC highly recommends a flea and parasite preventative.
- Cats with pronounced cough or signs of other contagious diseases will not be admitted.
- Quick Release collars are recommended.
- Food must be stored in a rodent proof container. Please bring appropriate size container for the length of stay.
- All cats must pass the HHFC behavior assessment. I understand and agree that in admitting my cat(s) into HHFC, HHFC has relied on my representation that my cat(s) have not harmed or shown aggressive or threatening behavior towards any person.
- Kittens less than 6 months old may attend HHFC before they receive their Rabies vaccine and before they are spayed/neutered. I understand the extra risks my kitten has of contracting illness or disease without being fully vaccinated.
- Cats not familiar with HHFC may experience separation anxiety when apart from their Customer "parent".
- Excessively long toenails may cause injury. If the staff of HHFC determines that your cat's toenails are a danger to others, HHFC will trim them at Customer's expense.
- Dramatic changes in food may cause upset stomachs, diarrhea, and/or colitis. Stress of boarding may also cause colitis. Reintroduce water and food slowly after returning home.
- Any behavior deemed dangerous or inappropriate by HHFC may result in dismissal.
- In the unlikely event your pet passes away at HHFC, arrangements will be made with your vet to hold the body until your return. For clients who don't have a local vet, HHFC will contact one at our discretion.
- I agree to pay for all services due at the time they are rendered. I understand any unpaid fees by me will be sent to collections and I will be responsible for all collections and legal fees incurred by such actions taken.
- I understand HHFC staff gives all pets involved in any type of incident a cursory examination, however, HHFC is not liable for the location, treatment or diagnosis of any injuries incurred on our premises. It is recommended you check your pet further or seek treatment for your pet by a licensed veterinarian at your discretion and cost.
- I may be assessed a cancellation/no show fee as specified by HHFC for major holidays.
- If you are riding the train and it is more than 30 minutes late returning to the station, your pet may be required to spend the night. There will be no extra charge if it is due to a malfunction of the train and your pet is picked up by 8:30 the next morning.
- **Unless other arrangements are made, cats must be picked up by 6 p.m. Monday through Friday, or 5 p.m. on Saturdays & Sundays (certain train schedules excepted). Pets not picked up by closing time may be required to spend the night. An overnight fee will be assessed and will replace any other late fees.** *updated 8/15/17*

_____ I have read, understand, and hereby agree to be bound by the HHFC Rules and Regulations.

HEALTHY HOUNDS & FAT CATS
Release and Waiver of Liability Agreement / Rules and Regulations
Consent to Authorize Medical Treatment and Expenditure / Day Care Enrollment

This Release and Waiver of Liability ("Release") is entered into between **Healthy Hounds & Fat Cats (true entity name HHFC, a Colorado limited liability company) ("HHFC")** and _____ (the "Customer"), who, in consideration of requesting animal products and services, and HHFC accepting to provide same, agrees to be bound by the terms and conditions herein. The Customer, for his/herself and any spouses, partners, agents, heirs, representatives, successors, and assigns, hereby waives, releases and holds harmless HHFC, its officers, members, managers, employees, agents, heirs, representatives, successors, and assigns from any and all liabilities, in law or in equity, for injury or damages to Customer, Customer's pet or any other property of Customer which arises in any way out of services and/or products provided by, or as a consequence of, Customer's association with HHFC now or in the future. *CUSTOMER ACKNOWLEDGES AND UNDERSTANDS THAT EVERY PET REACTS DIFFERENTLY AND THAT ANIMALS ARE, BY NATURE, UNPREDICTABLE. ANIMALS MAY, WITHOUT WARNING OR PROVOCATION, BITE OR CAUSE INJURY TO HUMANS AND OTHER PETS. CUSTOMER ACKNOWLEDGES THAT THERE ARE CERTAIN RISKS INCLUDING, BUT NOT LIMITED TO, BITES TO HUMANS OR OTHER PETS, AND THE TRANSMISSION OF ILLNESS OR DISEASE.* In the case of emergency, or for the use of the HHFC transportation services, Customer recognizes the risk of injury that accompanies transportation services and acknowledges that transport of Customer's pet to or from HHFC or any other necessary location is subject to the terms of this Release. Furthermore, Customer accepts any and all conditions, rules and regulations promulgated by HHFC associated with the activities, use of the facilities and transport, and hereby understands that Customer shall be bound by, and comply with, the Rules and Regulations herein. Customer acknowledges that this Release shall apply to new and future pets owned by Customer, and that this Release shall continue in effect until revoked by subsequent, written notice of Customer. Customer acknowledges that the Rules and Regulations are subject to change at any time without notice. Customer likewise acknowledges that this Release is comprised of the Rules and Regulations herein. Customer is **strongly advised to read and understand** each and every Rule and Regulation **before signing** this Release.

****All items subject to change. Revised on 12-11-2019****

Customer's signature below binds Customer to all such terms, conditions, rules and regulations contained in this Release.

CUSTOMER:

Signature: _____

Date: _____

Emergency Medical Treatment Plan

In case of a medical emergency we will make every attempt to reach you or your emergency contact by phone. You may also authorize treatment directly through your vet if they are within Durango City limits. For locals who choose to leave us a credit card for emergency treatments: this information will be kept in our locked filing cabinet. *****If you are riding the Durango Silverton Train, you will NOT have cell phone reception for most of the day. We highly recommend leaving us your credit card number. In this case we will destroy your credit card number at the end of your pet's stay with us.***

We will always try to contact you first. Please initial **ONE** of the following options:

____ I have contacted my vet clinic in Durango and have provided them with emergency instructions and payment information in the event that HHFC cannot contact myself or my emergency contact person.
(recommended)

OR

____ If you do not have a local vet you may leave your credit card number with HHFC. We will use our discretion and will always err on the side of caution and advocate for the best care and comfort of your pet.

Maximum Amount per pet _____ Card # _____

Expiration _____ Code _____ Zip Code _____

Billing Address if different from Home Address _____