



INITIAL: _____
DATE: _____

Boarding Agreement

Dog's Name: _____ Breed: _____

Name of Owner(s): _____

Home Address: _____

E-Mail: _____

H/W Phone: _____ Cell Phone: _____

Vet's Name: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Relationship to you: _____

List any behaviors we should be aware of: (e.g. likes to bark all night)

Required Items (if in our home):

- Food for the duration of stay and measuring scoop (if special diet/schedule is needed, note it above)
- Chew toys

Additional Items if needed: **(Please List)**

- Bed, Blanket
- Medication and a delivery system
- Toys, Balls, etc.

WE WILL ONLY ACCEPT DOGS/PUPPIES WHO MEET THE FOLLOWING:

THEIR SHOTS MUST BE UP TO DATE, MUST HAVE DOCUMENTS, ALL TOWELS, BEDDING, BLANKETS, ETC., MUST BE CLEAN, DOGS AND PUPPIES MUST BE WASHED

I, _____, give permission to Michael Rae and certified contractors of Dog Talk LLC. to provide sitting services and care for my dog(s) _____. Permission is given for my dog, _____ (*write NO if not approved*), to go for a ride in a vehicle operated by a contractor of Dog Talk. If any problems are to arise regarding the health of my dog(s), I direct a contractor of Dog Talk to take the necessary advisable action. This may include a veterinary visit to the above Doctor or an ER Doctor. I, _____ acknowledge that I am liable for any and all property damage, illness, or injury (received or caused) that may occur in my absence.

Print Name: _____

Sign Name: _____ Date: _____