



Dog(s) Name	Dog's Breed, Age, Coloring
Owner's Name	Owner's Primary Phone
Alt. Phone	Email
Owner's Address	Authorized Pickup Name(s)
Veterinary Name	Veterinary Phone

**We will do our best to ensure that your dog(s) is safe and sound with us while they enjoy our cage-free areas.**

**We'd appreciate your review and acceptance of the following policies and standards.**

- All dogs in our care must be current on vaccinations against Rabies, Bordetella, DHPP, Canine Influenza, and Leptospirosis.
- Bordetella and Canine Influenza are highly contagious airborne (multiple strains\*) viruses. If we note symptoms of Bordetella or Canine Influenza virus, your dog(s) must be picked up. If you cannot, we'll take your dog(s) to our Vet for observation and treatment at your expense.
- Owner will provide a negative fecal test prior to Meet and Greet and once every 6 months following.
- Dog(s) who have traveled will need two week quarantine after date of travel and negative fecal test to return to daycare.
- Dog(s) must be spayed/altered, the only exception is for puppies 9 months and younger.
- Dog(s) must be on an oral or topical flea regimen. If your dog(s) are found to have fleas they will be treated at your expense (flea bath at facility, and administration of non toxic topical flea powder)
- Dog(s) left for 14 days beyond the agreed date of pick-up may be offered for adoption.
- If your dog(s) does have food, environmental or other allergies (or sensitivities) or has pre-existing medical conditions, please list below. We may have to decline services if we cannot safely care for your dog(s).

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Please initial the following:

**I will notify PKLA of any health issues or medications my pet is on prior to the next visit at PKLA.**

In case of an emergency, (if I cannot be reached) my dog(s) may be treated by a vet chosen by Pet Keepers Los Angeles. (initial)

My dog(s) has all the required vaccinations. (Rabies, DHPP, Bordetella, Canine Influenza, and Leptospirosis. (initial)

I agree that a negative fecal test will be provided prior to Meet and Greet and every 6 months following.

My dog(s) does NOT have any allergies or pre-existing medical conditions. (initial)

**I assume all risk of disease, illness or injury to my dog(s) while they stay at Pet Keepers Los Angeles. (initial)**

I acknowledge that Pet Keepers Los Angeles staff are NOT veterinarians and NOT trained to diagnose or treat illnesses of the dog(s) staying with us. (initial)

I acknowledge that NOT all communicable diseases can be prevented by vaccinations. (initial)

Y  N  My dog(s) is microchipped. \_\_\_\_\_

I agree to pay for any property or personal damage (to animal or human) caused by my dog(s) that does NOT fall within the guidelines of PKLA insurance. (initial)

I agree that PKLA does not provide services in collaboration with any person or company. Should any outside person or party provide overlapping services, you release PKLA from any and all liability.(initial)



***Your signature below confirms the completeness and accuracy of the information you've provided and your understanding of our policies and of your financial responsibility for all veterinary and/or other necessary services incurred by/for your dog(s) during its stay at Pet Keepers Los Angeles, including those resulting from the actions of your dog(s). Your signature is also your waiver of all claims, actions or demands of any nature, foreseen and unforeseen, that you may have against Pet Keepers Los Angeles related to the care, control, health and/or safety of your dog(s) arising during drop-off, pick-up, transport and stay at the facility.***

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_