

Hoboken Unleashed Registration Form

Tell us about yourself:

Name _____
Address _____ Apt _____
City _____ State _____ Zip _____
Home Phone _____ Fax _____
Work Phone _____ Emergency Phone _____
Email _____ Mobile _____
Who else is authorized to drop off/pick up your pet? _____
Instructions in case of emergency: _____

How did you hear about us? _____

Tell us about your pet

Name _____ Breed _____ Age _____
Sex: M F Spayed/Neutered: Y N (If unspayed female, date of last cycle) _____
Weight: _____ Color: _____
How does your dog get along with other dogs? _____ People? _____
Under what conditions does your dog growl, snarl, bark, or cry? _____

Has your dog ever bitten or been bitten? _____
Has your dog used any day care/boarding facility before? _____
Does your dog use public "dog runs"? _____

Tell us about your pet's health

Veterinarian: _____
Address: _____
Phone: _____
Please describe your dog's general health: _____

Allergies: _____
Current Medications: _____
Frequency and time administered: _____
Date of last complete physical exam: _____

Vaccinations:

Rabies Date: _____ Due: _____ DHLP Date: _____ Due: _____
Parvo Date: _____ Due: _____ Bortadella Date: _____ Due: _____

Please tell us about your pet's daily routine

Regular Food: Brand: _____ Variety: _____ Feed Times: _____
Quantity: _____ Instructions: _____
Exercise and walk times: _____
Items brought: _____

I certify that I am the owner or the agent of the owner of the aforementioned pet, and that I am authorized to board the pet and sign this form. I authorize Hoboken Unleashed to contact my veterinarian in order to confirm health temperament and vaccinations. I give consent to Hoboken Unleashed to act on my behalf by obtaining veterinary care at my expense, should Hoboken Unleashed deem it necessary. I have read the schedule of fees and agree to pay all the charges at checkout, unless previously arranged. I authorize Hoboken Unleashed to charge my credit card account, if so provided for any outstanding invoices. I release Hoboken Unleashed (and its agents and employees) from any liability or claim due to injury or death of my dog, unless Hoboken Unleashed has been negligent in the care of my dog. I understand that under no circumstances will Hoboken Unleashed be liable for consequential damages or damages beyond the replacement value of my dog.

Signed _____ Date _____