

Red Hydrant Pet Spa and Boutique
21780 State Road 54
Lutz, FL 33549

CLIENT INFORMATION and ENROLLMENT AGREEMENT

Owner Information *PLEASE PRINT CLEARLY!*

Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone Number :
(____) _____ Home Cell Office

Alternative Phone Number:
(____) _____ Home Cell Office

Email: _____

Other people Authorized to Pick up your Dog:

Emergency Contact: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Pet Information

Name: _____ Nickname: _____

DOB: _____ Breed: _____

COLOR: _____ Special Markings: _____

Gender F ___ M ___ Spayed/Neutered Flea/Tick Preventative: _____

Please list any known Medical Issues: _____

Veterinarian Information

Clinic Name: _____

Primary Doctor: _____

Phone: _____ Fax: _____

Address: _____

City: _____ State: _____ Zip Code: _____

REQUIRED IMMUNIZATIONS

- Distemper/Parvo Combination (DHLPP or Similar)
- Rabies
- Bordetella

Please attach completed and signed Red Hydrant VETERINARY RECORDS CONSENT FORM

Please read carefully and sign below:

- 1) I understand that although the dogs are carefully supervised, Sydney and Muriel LLC, dba The Red Hydrant Pet Spa and Boutique (Red Hydrant) does not accept aggressive dogs. Due to the playful and sometimes zealous way dogs interact and play with each other, injuries can possibly occur. I agree that neither Sydney and Muriel LLC, dba The Red Hydrant Pet Spa and Boutique (or their owners) nor their staff will be held responsible and I hereby release them of any liability whatsoever.
- 2) I understand that in welcoming my dog(s), Sydney and Muriel LLC, dba The Red Hydrant Pet Spa and Boutique has relied on my representation of the information that I have provided and that I affirm my dog(s) have not harmed or shown aggression towards another person or dog.
- 3) I understand that if I or any of my emergency contacts listed above cannot be reached in the event of an emergency, Red Hydrant has sole discretion in determining necessary care and action for my pet(s). This is including but not limited to vet care and I will assume responsibility for all expenses and damages.
- 4) I understand my dog(s) must be in good general health and must consistently be current on Rabies, DHLPP and Bordatella vaccinations and MUST BE Spayed or Neutered by six (6) months of age. I agree to provide proof of required vaccinations prior to their first visit and when vaccinations are updated. All dogs must also be on a regular flea, tick and heartworm program.
- 5) I understand under no circumstances will Red Hydrant accept an ill dog. If a dog becomes ill during his/her stay he/she will be quarantined until pickup. Red Hydrant, at its discretion, will take him/her to a Vet if deemed necessary and all expenses incurred will be my responsibility
- 6) I understand my dog(s) will only be released to the owner of record unless prior pre-approved arrangements have been made with the Red Hydrant.
- 7) I understand and agree that my dog(s) will be evaluated with regards to off leash play types and that there is no guarantee or implied acceptance of compatibility.
- 8) I understand that my dog(s) may be used in a socialization evaluation process or evaluation and would be supervised by staff members of Red Hydrant at all times.
- 9) I understand and agree my dog(s) may be videotaped and photographed or recorded. Red Hydrant shall be the exclusive owner of the results and all proceeds of such recordings with rights to copyright to use and to license to others in any manner. I also understand that my dog(s) may be used in media and promotional advertizing of The Red Hydrant Pet Spa and Boutique.
- 10) I understand that policies and rules are subject to change at the discretion of Sydney and Muriel LLC, dba The Red Hydrant Pet Spa and Boutique. Red Hydrant will do its best to inform its clients of any policy changes.

I _____ certify I have read and understand these rules,
Print Your Name

policies and regulations as set forth in this agreement. I agree to abide by the rules and accept all terms, conditions and statements of this agreement.

Your Signature Date: _____