## Lupine Kennels Repeat Customer Form

880 155<sup>th</sup> Street Amery, WI 54001 (715) 268-2345

## Payment Must Be Received at Pick up

My Pet has not shown any sign of illness such as: Cough, Sneeze, Diarrhea, Vomit, Goopy eyes or Running nose in the last 30 days.\_\_\_\_\_(initial)

I, the owner understand that I am responsible for picking up my pet: Date dropping off \_\_\_\_\_\_Time\_\_\_\_\_ Date Picking up \_\_\_\_\_Time\_\_\_\_\_

## DROP OFF/PICK UP HOURS 9-12AM OR 6-7:30 PM ONLY We are closed Saturday evening for pick up or drop off WE ARE NOT OPEN FOR PICK UP/DROP OFF OUTSIDE THESE HOURS

You will be billed for the entire time you have stated on this sheet even if you pick up days earlier.

Office Verification: Vaccinations for Rabies,Bordetella, Distemper Combo UTD? Verified By:

**Would you like extra services? If time allows** Full Groom (Big Dogs Extra Inquire for pricing) \$42.00+ Yes No

Nails \$10.00 Yes No

Wash \$36.00 + Yes No

Wash & Nails \$38.00 + Yes No

## For boarding dogs and owners:

By signing this contract I am giving my consent for Lupine Kennels and it's owner to take my dog to the vet if deemed necessary by any of the aforementioned parties and that I, the owner of the pet(s), agree to pay for any and all such bills. Should my dog bite or cause injury to another dog or person I agree to pay for any and all medical or veterinary expenses. I also agree to pay all costs for damage done to the kenneling facility by my dog. I understand that I am boarding my pet at my own risk and do not hold Lupine Kennels liable for any illness, injury or death. I the owner of said pet agree that the information provided to Lupine Kennels about my pet to the best of my knowledge to be true.

Owner Signature

Date