

# Amanda's

## *K9 Bed and Biscuit*

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### Boarding Agreement

I \_\_\_\_\_ am leaving my dog(s)  
\_\_\_\_\_ in the care Amanda's K9 Bed and Biscuit for a  
reservation period from: \_\_\_\_\_  
to \_\_\_\_\_.

I understand that my dog must have all current vaccinations including Bordetella (Canine Kennel Cough). My dog has not been exposed to rabies or distemper within a thirty day period prior to boarding.

I authorize Amanda's K9 Bed and Biscuit to provide any care necessary in the event of an emergency including medical attention, special care or medication, and I will pay for any services that Amanda's K9 Bed and Biscuit incurs on behalf of my dog.

I take responsibility for the consequences of any aggressive/injurious behavior of my dog while on the property of Amanda's K9 Bed and Biscuit and I agree to pay for any damages caused to the facility as a result of my dog's behavior.

**Community Play with other dogs** Yes \_\_\_\_\_ No \_\_\_\_\_

Amanda's K9 Bed and Biscuit will use all precautions when socializing dogs. I understand that if my dog socializes with other dogs that they may become injured through playing and I do not hold Amanda's K9 Bed and Biscuit or others responsible for any injuries or costs that may result. Community play will not be available to any dogs that are aggressive towards other dogs, jumpers, not neutered or spayed (puppies up to 6 months are acceptable)

**Off leash walking** Yes \_\_\_\_\_ No \_\_\_\_\_

### Hours of Operation

Pickup and drop off times:  
**9-10 am Daily**

### Rates Effective January 01 2024

\$50 per day, per dog, starting at arrival time, plus HST.

\$85 per day, for a pair of dogs, starting at arrival time, plus HST.

\$20 per day, per cat, starting at arrival time, plus HST.

**Signature of Owner** \_\_\_\_\_ **Date** \_\_\_\_\_

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### Owner Information

Owner: \_\_\_\_\_ **Who can we contact on your behalf if need be?**  
Address: \_\_\_\_\_ Name: \_\_\_\_\_  
Town/Postal Code: \_\_\_\_\_ Day phone: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Veterinarian: \_\_\_\_\_

### Pet Information

Name: \_\_\_\_\_ Date of Rabies Vac. \_\_\_\_\_  
Breed: \_\_\_\_\_ Date of Bordetella \_\_\_\_\_  
Colour: \_\_\_\_\_ Date of Distemper Vac. \_\_\_\_\_  
Male: Neutered? Yes No (circle one)  
Female: Spayed? Yes No (circle one)  
Birth date: \_\_\_\_\_  
Does your dog have any allergies? No Yes. Explain. \_\_\_\_\_  
Is your dog (please circle): Blind Deaf Old Arthritic Other: \_\_\_\_\_  
Describe your dogs health (past injuries, illnesses, scars) \_\_\_\_\_  
Any soreness, limping, fears; example thunder dislikes; example cats etc. \_\_\_\_\_  
Does your dog require any medications? No Yes Explain Dosage/Time/Amounts \_\_\_\_\_

### Feeding Schedule

Time	Amount Dry (in Cups)	Amount Wet (1 Tbsp ½ can)
Breakfast		
Lunch		
Supper		
Night		

### Dog's Behavior Profile (circle what best represents your dog)

Quiet Shy Friendly Submissive Energetic Digger Noisy Fence Climber  
Escapist Destructive People Aggressive Afraid of Storms Dislikes Cats  
Suffers separation anxiety Rough player Gentle player Dislikes Dogs Vocal player  
Not interested Fearful Likes any dog Prefers small dogs Toy aggressive  
Prefers big dogs Humps others Better with opposite sex Likes fetch

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