KIKA dog walking services My dog's book

Dear valued client,

We appreciate your interest in our dog care services and want to ensure the best possible care for your furry friend. To help us provide the best care possible, we ask that you complete the following form with information about your dog's behaviour and any other relevant information. This form will help us understand your dog's needs and preferences and ensure that we can provide the best possible care. Please take a few moments to complete the form and sign it to acknowledge your agreement to our terms and policies.

Thank you for entrusting us with the care of your beloved pet.

Sincerely,

KIKA dog walking services

Owner Information:
Full Name:
Address:
Phone Number:
Email Address:
Dog Information:
Dog's Name:
Dog's date of birth:
Breed:
Gender:
Color/Markings:
Weight:

Behaviour Information:

Is your dog house-trained? Yes / No
Is your dog crate-trained? Yes / No
Is your dog food aggressive? Yes / No
Is your dog toy aggressive? Yes / No
Is your dog spayed? Yes /No

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Does your dog have any fears or phobias? Yes / No
If yes, please specify:
Does your dog have any medical conditions or allergies? Yes / No
If yes, please specify:
Has your dog ever shown aggression towards people or other animals? Yes / No
If yes, please specify:
Does your pet try to escape from enclosed areas?
If yes, please specify:
I,(owner's full name), hereby certify that the information
provided above is true and accurate to the best of my knowledge. I acknowledge that the care of my
dog is the sole responsibility of the dog care company and I release them from any and all liability related to the care of my dog. I also agree to abide by the terms and policies of the dog care
company.
X
Owner Signature and Date

KIKA Dog walking services AKA KDWS Canine Care Services Agreement | Francesca Dalesio

I. her	eby certify that I have read and understood the following
	walking services and agree to comply with them:
Shots: I certify that my dog(s) has/h	ave up-to-date vaccinations.
could potentially jeopardize other gu	re in good health and free from any condition which nests. I understand that if my dog(s) has/have been ill ne last 30 days, veterinarian certification of health will be ed.
	s/are non-aggressive and not food or toy protective. I ressive behaviour towards any person or any other dogs wed from KDWS.
Reservations: I understand that reset than 24 hours' notice will be charged	ervations are required and that cancellations with less d full fees.
_	or the transport of my dog(s), KDWS uses vehicles which of my dog(s). I understand that transportation is a risk
Social Media: I authorize KDWS to t media pages including Facebook, Inc	ake pictures of my dog(s) and upload them to their social stagram or their website.
notify me as soon as possible. Depen	an accident or injury, I understand that KDWS will ading on the extent of the injury, I may be able to contact 'S will take my dog(s) to their vet, but I will be the vet.
Track Day: I understand that my dog	g(s) must complete a track day before being accepted

into a regular day-care or boarding service. I understand that KDWS will decide whether my dog(s) will be accepted to join the group or not. Aggressive or dangerous dogs will be reported to the authorities.

Clients understand that they are solely responsible for any harm caused by their dog(s) while attending KDWS.

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Clients further understand and agree that in admitting their dog(s) to KDWS, KDWS has relied on their representation that their dog(s) is/are in good health and has not harmed or shown any aggressive or threatening behaviour towards any person or any other dogs.

Clients further understand and agree that KDWS and their staff, agents, representatives, and volunteers will not be liable for any problems that develop provided reasonable care and precautions are followed, and hereby release them of any liability of any kind whatsoever arising from their dog(s) attendance and participation.

Clients further understand and agree that any medical problem that develops with their dog(s) will be treated as deemed best by staff and volunteers of KDWS in their sole discretion, and that they assume full financial responsibility for all expenses involved.

If the animal is injured, lost or dies during KDWS, no claims will be made by the owner of the animal (except for gross negligence. Veterinary expenses will be covered by the owner.

The vaccination card must be mandatory for the first visit for each animal.

I am writing to formally declare that I agree that all the conditions outlined abo	∕e are fully
covered for all the services provided by the company.	

I,	, have read and understood the above General Terms and
Conditions.	

X	
Owner Signature and Date	
V	
X	

Francesca Dalesio KDWS