

BLACKBERRY BOARDING AGREEMENT FORM

NAME..... ADDRESS.....

TEL..... MOB..... EMAIL.....

Pet name.....

Age.....
Type/Breed.....

Colour.....
Sex

Pet name.....

Age.....
Type/Breed.....

Colour.....
Sex.....

Pet name.....

Age.....
Type/Breed.....

Colour.....
Sex

Pet name.....

Age.....
Type/Breed.....

Colour.....
Sex

We would encourage owners to bring some of their pet's personal things i.e. toys/favourite treats and other activities they enjoy as this helps to settle them and reduce stress.

(Please use this space to list your pet's routine)

VETERINARY AUTHORISATION DETAILS

VET'S NAME.....

ADDRESS.....

.....

TEL.....

To the veterinary surgery:

During my absence Sharon Maw & Chris Latham will be caring for my pet(s)

and has my permission to transport them to your surgery for treatment. I authorise you to

treat my pet(s) and will be responsible for payment to you either before my departure or

on my return. Please file this form with my records.

I hereby give Sharon Maw/Chris Latham permission to transport my pet (s) to the above mentioned veterinary surgeon or nearest veterinary surgery. In a medical emergency I agree to the closest appropriate Veterinary practice being used. I understand that Sharon Maw/Chris Latham assumes no responsibility for the loss of the pet(s) and is released from all liability related to transportation, treatment and expense These conditions also apply to all future bookings.

Client signature.....(Required.)

Vet signature.....(Only required if treatment is needed.)

PET(S) DETAILS

Rabbits & Guinea Pigs – would you like your pet to spend time outside daily, in a run, weather permitting?
Please note that if the pet is to have access to the garden that in the event of the pet going missing the Pet Boarder would notify the vet, ID chip, insurance and local police.
Pets are always supervised when out in the garden in runs and are not left unattended.

FEEDING PLAN (Please state brand of dried food used ie; Science Select, Burgess Excell, Harry Hamster, Gertie Guinea Pig etc. and types of fresh Veg & Fruit enjoyed on a regular basis.)

Does your pet prefer a water bowl or bottle?

ADDITIONAL NOTES:

IMPORTANT INFORMATION

- **Emergency contact**

This should be someone who can make a decision about surgery or euthanasia and advise what arrangements you would wish in the event of your pet dying.

- In the event of surgery or euthanasia the Pet Boarder will accept the advice of the veterinary surgeon, would you wish to be notified before your planned return?.....
- In the event of you not returning from your time away, have arrangements been made for the re-homing of your pet (s)
- **Insurance** details if applicable **Pet Plan Insurance No.**
- **Is your pet neutered**
- Rabbit Vaccinations (**please provide certificates for Myxomatosis and VHD**)
- Medical history

I HEREBY CONFIRM THAT I AM THE OWNER OF THE ABOVE NAMED PET (S) AND THAT I AUTHORISE THE FOLLOWING PET BOARDER

...Sharon Maw & Chris Latham of Watership Down, 23 Rosedale Close, Hardwicke, Glos GL2 4JL...

TO ACT AS GUARDIANS DURING MY ABSENCE AND TO TAKE ANY ACTION WHICH HE/SHE CONSIDERS SUITABLE IN ORDER TO PROTECT AND KEEP IN GOOD HEALTH THE ABOVE NAMED PET (S). I DO FURTHER CONFIRM THAT I WILL BE RESPONSIBLE FOR ANY COSTS WHICH MIGHT BE INCURRED, EITHER VETERINARY OR OTHER, AS A RESULT OF ANY SICKNESS, ACCIDENT OR DAMAGE CAUSED TO OR BY THE ABOVE NAMED PET (S). EXCEPT THIRD PARTY LIABILITY, AND THAT I WILL PAY ANY SUCH COSTS OR EXPENSES ON DEMAND.
I ALSO UNDERSTAND THAT NO LIABILITY WILL ATTACH TO THE ABOVE MENTIONED PETSITTERS OR NATIONAL PETSITTERS AND THESE CONDITIONS APPLY TO ANY FUTURE BOOKINGS.

Bookings require a deposit of 25% of total fees.

Cheques payable to Miss S A Maw, Watership Down, 23 Rosedale Close, Hardwicke, Glos GL2 4JL

RATE TO BE CHARGED **FROM****TO**..... **TOTAL DUE NOW (25% of total fees)**..... (please note that this is non refundable & bookings cannot be accepted without deposit.

SIGNATURE: **DATE:**