



WagnBone Adventures pet care agreement form

Customer Information:

Name:

Address:

Postcode:

Home number:

Mobile:

Email:

Nominated contact:

*anyone who is able to liaise with me about your pet

Emergency contact details:

Information about your dog:

Name:

DOB:

Gender:

Breed:

Colour:

Is your dog spayed/neutered? Y/N

Are all vaccinations up to date? Y/N

Date of last season if applicable?

Is your dog microchipped? Y/N

Is your dog insured? Y/N

Date of last flea/worm treatment?

Pre-existing medical conditions?

Does your dog currently take medication? Please provide relevant instructions.

Does your dog have any allergies? Y/N

*If yes please provide details below.

Vet name:

Address:

Contact details:

Are you happy for us to take your dog to their nominated vet? (Whether precautionary or in the event of an emergency)

Y/N

Are you happy for us to take your dog to our nominated vet? (Whether precautionary or in the event of an emergency)

Y/N

Are you happy for us to carry out first aid for minor injuries or in the event of an emergency?

Y/N

Has your dog/s ever displayed any aggressive tendencies? Y/N *if yes, please outline below

About the walk/visit:

Please confirm that your dog has an up to date identification tag, which is attached to his collar/harness?

Y/N

Are you happy for your dog to be off-lead in a safe space? Y/N

How well does your dog respond to recall?

Are you happy for your dog to receive treats when in our care? Y/N

Does your dog have any special requirements on their walk/visit? (Traffic avoidance/favourite toy/quiet area)

How well does your dog travel and are you happy for your dog to travel in our vehicle? Y/N

Are you happy for your dog/s to swim? Y/N

*WagnBone Adventures will do their utmost to accommodate specific walk times, however we may occasionally be delayed due to circumstance outside of our control.

Please select day(s) and include preferred times.

	09:00 – 12:00	12:00 – 15:00	15:00 – 18:00	18:00 – 20:00	Day Care
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

Weekly

Fortnightly

Monthly

Occasional *please specify date(s)

For home visits and pop-in, please stipulate what activities/services you would like WagnBone Adventures to provider i.e. feeding, playing, brushing?

Cost of service

Per 30 minutes

Per 60 minutes

Per Visit

Other

Disclaimer and Waiver of Liability:

I have read and agree to abide by the terms of business set out by WagnBone Adventures and confirm that all information I have given in this application is true, accurate and complete to the best of my knowledge.

I confirm that I am the owner of the above named dog(s) and that I authorise WagnBone Adventures to act as guardian during my absence and to take any action which is considered suitable in order to safeguard the above named dog(s). I further confirm that I will be responsible for any costs which may be incurred, either veterinary or other, as a result of sickness, accident or damage caused to or by the above-named dog(s). With the exception of third-party liability, I will pay any such costs immediately. I also understand and agree that no liability will attach to WagnBone Adventures.

Signature: Date:

Off the lead consent and Waiver of Liability:

I hereby give permission for WagnBone Adventures to allow my dog(s) off the lead and trust that this will be done in a safe and suitable space. I certify that, to my understanding, my dog(s) is trustworthy off-lead and has good recall. I realise that there are certain risks involved with off-lead activities and that I will not hold WagnBone Adventures responsible in any way should any harm befall my dog.

Signature: Date:

Key Holder Disclaimer and Waiver of Liability

I have read and agree to abide by the Terms of Business provided by WagnBone Adventures. I understand that this form acts as permission to hold keys to my property, which I have provided willingly. I hereby indemnify WagnBone Adventures against liability of any kind whatsoever arising from damage or loss of any property. I agree to fit a key safe at the property, alternatively I agree to Wagnbone Adventures obtaining a duplicate key to my property (at their own expense)

Signature: Date:

Use of images and videos

We often publish videos or images captured during our walks on our website or via social media channels. We may caption these with your dog(s) name but will never publish any other information which could identify your pet.

I hereby give permission for WagnBone Adventures to use images and videos of my pet in line with the above statement.

Signature: Date:

Veterinary Authorisation

WagnBone Adventures are employed to walk and care for my dog(s) and have my permission to transport them to your surgery for preventative/precautionary or urgent treatment. I authorise you to treat my dog(s) and will be responsible for all payments owed to you.

I hereby give WagnBone Adventures permission to transport my dog(s) to the aforementioned veterinary surgeon. I understand that WagnBone Adventures assumes no responsibility for the loss of the dog(s) and is released from all liability related to transportation, treatment and expense.

Signature..... Date:

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