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## Enrollment Agreement

### **Parent Information**

Parent(s) Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

What brings you in? Daycare: \_\_\_\_\_ Other: \_\_\_\_\_

Names of anyone else who are authorized to pickup: \_\_\_\_\_

### **Veterinarian Information**

Veterinarian Office: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_

### **Tell Us About Your Kids!**

1. Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Male/Female: \_\_\_\_\_ Neutered/Spayed: \_\_\_\_\_ \*required for all attending daycare over the age of 6 months\*

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_

2. Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Male/Female: \_\_\_\_\_ Neutered/Spayed: \_\_\_\_\_ \*required for all attending daycare over the age of 6 months\*

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_

3. Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Male/Female: \_\_\_\_\_ Neutered/Spayed: \_\_\_\_\_ \*required for all attending daycare over the age of 6 months\*

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_

**Please make sure to have your veterinary office fax over all vaccination records. It is required that ALL fur babies are up to date on Bordetella, Distemper, Parvovirus and Rabies. If Bordetella has never been given or is overdue, it must be administered 7-10 days prior to daycare. If we do not have proof of the current vaccinations, we cannot allow your pet in to the facility.**

**PRIOR TO USING OUR SERVICES, THE FOLLOWING CONTRACT AND RELEASE OF LIABILITY MUST BE READ, SIGNED AND DATED.**

1. All dogs must have a buckle or snap collar.
2. All dogs must be at least 4 months of age or older. Dogs 6 months of age must be neutered/spayed.
3. I agree to pay the rates that are in effect on the day my dog is checked into Barks & Recreation.
4. I agree that my pet shall not leave Barks & Recreation until I have paid all charges owed for services.
5. I understand that while attending daycare at Barks & Recreation it is an interactive play setting and is not without some risk of injury. Also, I understand that despite all the dogs appearing healthy and being handled with the greatest amount of care, dogs are not always predictable and the unexpected can occur. I hereby waive and release Barks & Recreation, it's owners, operators/agents, and employees from any and all liability of any nature including injury, loss or damage, which may result from the action of any dog, including my own. I further agree to pay any and all expenses incurred as a result of accidental injury to my dog, as well as injury to any other dog caused by my dog.
6. I agree to provide Barks & Recreation with current vaccination records and understand that I am to keep them up to date while attending the facility.
7. I certify that my dog is in good health and has not been ill with any communicable disease in the last 30 days. I also certify that my dog has not harmed, shown aggression or threatening behavior towards any person or other dogs.
8. If your dog is admitted to Barks & Recreation for daycare and is found to have fleas and/or ticks, they will be given a bath and you will be charged an additional fee.
9. I agree that Barks & Recreation has my permission to photograph and/or video my dog for use on their social media sites.
10. Dogs attending daycare must be picked up by the time of closing or there will be a late pick-up charge applied to your invoice.
11. Barks & Recreation reserves the right to refuse service to any dog, for any reason, particularly if staff deems a dog demonstrates aggression toward any person or other dog.

By signing this contract, I state that the information provided is accurate to the best of my knowledge. I certify that I have read, understand and agree to its terms and conditions. I also certify that my dog is in good health and up to date on all required vaccinations.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## Medical Release

The safety and well-being of your pet(s) is of the highest importance to us at Barks & Recreation. Ensuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously.

We do our best to have our pet parents screen for pre-existing health conditions but some factors may be beyond our control. In the event that a medical emergency arises while a pet is at our facility or participating in a service that we provide, it is imperative that we are able to obtain immediate medical treatment.

In the event that a staff member deems that your pet is in need of immediate veterinary care, the following steps will be taken:

- Your pet will be taken quickly and safely to your veterinarian. However, in the event that we are unable to contact your vet or have your pet(s) seen within a reasonable amount of time, considering the emergency, we will take them to the nearest veterinarian/emergency clinic.
- We will make every effort to contact you through the phone numbers and emergency contacts you have provided as soon as we have secured a medical treatment center.
- As soon as your pet has been seen by the veterinarian and is safely back at our facility, we will contact you with a follow up.

Our goal is to get your pet medical attention as quickly as is reasonably possible. For that reason, we require all pet parents to acknowledge this form prior to your pet(s) stay or service at Barks & Recreation.

I, \_\_\_\_\_ hereby authorize Barks & Recreation, to seek medical attention for my pet(s) in the event that my pet(s) has a medical emergency and a staff member of Barks & Recreation, at his/her sole discretion, deems it is necessary to seek the immediate attention of a licensed veterinarian. I further authorize Barks & Recreation, to seek medical care from a veterinarian/emergency clinic other than my primary veterinarian in the event that my primary veterinarian is unavailable or considering the emergency, is not able to see my pet(s) within a reasonable amount of time.

I also understand that I am fully responsible for all expenses incurred for the treatment of my pet(s) and agree to reimburse/pay either Barks & Recreation or the veterinarian in full before picking up my pet(s).

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name: \_\_\_\_\_