

*Sandhills Equine Center, LLC and Pet Boarding*  
5365 157 AVE SE  
Kindred, ND 58051  
701-645-9088/cell 361-8566/fax 645-9016

**\*\*\*\$10 per calendar day per pet boarded\*\*\***

**A copy of the current vaccinations must be on file.**

**Please print out, complete, and bring to your pet's first visit.**

Owner's Name: \_\_\_\_\_  
Address, City, State, Zip: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_  
Cell Phone #1: \_\_\_\_\_ Cell Phone #2: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Emergency Phone & Name (friend, neighbor, family, etc.)  
Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone#: \_\_\_\_\_

How did you hear about *Sandhills Equine Center and Pet Boarding*? \_\_\_\_\_

Who is your vet? \_\_\_\_\_ Phone# \_\_\_\_\_

Do you want your pet to go to your vet (or our vet on call) in case of emergency?

Please circle: [ My vet ] [ Your vet on call ]

**Pet(s) Name(s): #1** \_\_\_\_\_ [ Dog / Cat / Other ] [ M / F ] [ Age \_\_\_\_\_ ] [ Spayed or Neutered ]  
[ Breed \_\_\_\_\_ ] [ Coat Color \_\_\_\_\_ ]

Feed Instruction:

**Pet(s) Name(s): #2** \_\_\_\_\_ [ Dog / Cat / Other ] [ M / F ] [ Age \_\_\_\_\_ ] [ Spayed or Neutered ] :  
[ Breed \_\_\_\_\_ ] [ Coat Color \_\_\_\_\_ ]

Feed Instruction:

**Pet(s) Name(s): #3** \_\_\_\_\_ [ Dog / Cat / Other ] [ M / F ] [ Age \_\_\_\_\_ ] [ Spayed or Neutered ]  
[ Breed \_\_\_\_\_ ] [ Coat Color \_\_\_\_\_ ]

Feed Instruction:

Personality Questions (circle those that apply with 1-not very much, 2-average, and 3-very much)

Pet #1: [Loves people - 1 2 3] [Loves other Dogs/Cats - 1 2 3] [Shy of People - 1 2 3]  
[ Afraid of People - 1 2 3 ] [ Cage Aggressive - 1 2 3 ]

Pet #2: [Loves people - 1 2 3] [Loves other Dogs/Cats - 1 2 3] [Shy of People - 1 2 3]  
[ Afraid of People - 1 2 3 ] [ Cage Aggressive - 1 2 3 ]

Pet #3: [Loves people - 1 2 3] [Loves other Dogs/Cats - 1 2 3] [Shy of People - 1 2 3]  
[ Afraid of People - 1 2 3 ] [ Cage Aggressive - 1 2 3 ]

Please answer YES or NO to the following questions:

Has your dog/cat/other ever bitten any person or animal? #1 Yes No #2 Yes No #3 Yes No

Does your dog/cat/other like baths, brushing, grooming? #1 Yes No #2 Yes No #3 Yes No

**Health Questions**

Does your dog/cat/other have any allergies to food or shampoo? #1 Yes No #2 Yes No #3 Yes No

Any health issues that our team members should be aware of? (i.e.: seizures, bad hips, bad back, blind, deaf etc.)

Please explain:

\_\_\_\_\_

Is your pet on medications? #1 Yes No #2 Yes No #3 Yes No

Please list:

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Does your dog/cat/other have a sensitive stomach when switching foods? #1 Yes No #2 Yes No #3 Yes No

Is your pet on a prescription or special diet? #1 Yes No #2 Yes No #3 Yes No

Please list:

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

What is your pets' feeding schedule?

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Does your pet enjoy treats and may we give them to your pet? #1 Yes No #2 Yes No #3 Yes No

How would you describe your pet while he/she is boarded? Calm \_\_\_\_\_ Agitated \_\_\_\_\_ Escape Artist \_\_\_\_\_

Were there any problems or concerns noted during their stay while being boarded this past year?

Please list:

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Does your pet suffer from separation anxiety? #1 Yes No #2 Yes No #3 Yes No

Does your pet chew on inappropriate items at home? If yes, explain. #1 Yes No #2 Yes No #3 Yes No

Has your pet ever chewed on or escaped from any type of fencing? #1 Yes No #2 Yes No #3 Yes No

Does your pet like to dig? #1 Yes No #2 Yes No #3 Yes No

Is your pet afraid of thunderstorms? (If afraid of storms, is medication needed?) #1 Yes No #2 Yes No #3 Yes No

List Meds: \_\_\_\_\_

Arrival Date:

Pickup Date:

Actual Pickup if different than above:

- Please Note: If you need to arrange for someone other than yourself to pick up your pet, you will need to authorize it when you check-in. If you have someone else pick up your pet, *Sandhills Equine Center, LLC and Pet Boarding* is not responsible should something happen to your pet once it leaves our building.
- If the dog/cat/other becomes seriously ill or injured, the owner or emergency contact will be notified at once. If the owner/emergency contact does not inform immediately regarding measures to be taken, or if the state of the pet's health demands quick action, *Sandhills Equine Center, LLC and Pet Boarding* shall have the right to call the veterinarian designated by you, or if no vet is designated, to use our vet on call, or administer medicine or give other advisable attention, within our discretion and judgment. Such expenses shall be paid promptly by the owner of the pet.
- All dogs/cats/other boarded, handled, or cared for by *Sandhills Equine Center, LLC and Pet Boarding* without liability on the part of *Sandhills Equine Center, LLC and Pet Boarding* for loss or damage from disease, death, running away, theft, injury to persons, self inflicted injury due to behavior problems, other dogs, or property by said dog/cat/other, or other unavoidable causes, due to diligence and care having been exercised.
- *Sandhills Equine Center, LLC and Pet Boarding* requires that all guests be current on vaccinations to ensure a healthy stay for your pet and the health of the other guests. If your pet is not current on vaccinations, you may be turned away or your pet will be taken to the vet and you will be charged a \$35.00 transportation fee along with the cost of the vaccinations.
- I agree to give permission for *Sandhills Equine Center, LLC and Pet Boarding* to use my pet(s) for advertising purposes. I understand there will be no monetary consideration for the use of my pet(s) in advertising.
- Any controversy or claim arising between *Sandhills Equine Center, LLC and Pet Boarding* and client shall be settled by binding arbitration with the Commercial Arbitration Rules of the American Arbitration Association in Fargo, ND.
- Signature \_\_\_\_\_ Date \_\_\_\_\_