

# Bunk & Biscuit

A Luxury All-Suite, All-Inclusive Pet Retreat

## Information Form

Owner's Name(s): \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone Mom: \_\_\_\_\_

Cell Phone Dad: \_\_\_\_\_

Place of Employment and Title: \_\_\_\_\_

\_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency Contact (other than self):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### **Veterinarian**

Facility Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Vet's Name: \_\_\_\_\_

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

What future dates would you like us to book?

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Please use separate sheets for each pet.

**Pet Information (1<sup>st</sup> Pet):**

Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: \_\_\_\_\_

Neutered/Spay: \_\_\_\_\_ Birthday: \_\_\_\_\_ Weight: \_\_\_\_\_

**Pet Personality Profile**

**General Information:**

Are there any kinds of people your pet automatically fears or dislikes?

\_\_\_\_\_

What commands does your dog know? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How would you best describe your pet's personality toward people?

Never Grown Up \_\_\_\_ Aggressive \_\_\_\_ Timid \_\_\_\_ Happy Go Lucky \_\_\_\_

A lover \_\_\_\_

How would you best describe your pet's behavior toward other pets?

Aggressive \_\_\_\_ Timid \_\_\_\_ Fearful \_\_\_\_ Overly Enthusiastic \_\_\_\_

Not a group player \_\_\_\_

**Health and Grooming:**

What is the flea/tick treatment that you use? \_\_\_\_\_

\_\_\_\_\_

Does your pet have any sensitive areas on his/her body? Example: Nails, Ears

\_\_\_\_\_

Where are your pet's favorite petting spots?

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Can your pet have toys? \_\_\_\_\_ Bones to chew on (pertaining to dogs)? \_\_\_\_\_

Does your pet suffer from any of the following:

- Flea Allergies/Contact Allergies/Food Allergies: \_\_\_\_\_  
\_\_\_\_\_
- Heart murmur or any other circulatory conditions: \_\_\_\_\_  
\_\_\_\_\_
- Arthritis, hip/elbow dysplasia, or any other bone-related conditions:  
\_\_\_\_\_
- Severe separation anxiety: \_\_\_\_\_
- Constipation/loose stool, corpophagy (poop-eating), gas: \_\_\_\_\_  
\_\_\_\_\_
- Dry skin, cracked foot pads, flaky/cracking nails: \_\_\_\_\_  
\_\_\_\_\_
- Eye problems: cataracts, growths, dryness, cherry eye, repeat infections:  
\_\_\_\_\_
- Repeat bladder or urinary tract infections: \_\_\_\_\_  
\_\_\_\_\_

### **Behavior**

Does your pet like...

Tennis Balls? \_\_\_\_\_ Frisbees? \_\_\_\_\_ Squeeze toys \_\_\_\_\_ Tug toys \_\_\_\_\_

Do you want your dog to have ...

Group playtime? \_\_\_\_\_ Individual playtime? \_\_\_\_\_

Has your pet ever been to daycare? \_\_\_\_\_

Has your dog ever been to a dog park? \_\_\_\_\_

Was he/she a good group player? \_\_\_\_\_

Any problem? Please explain: \_\_\_\_\_  
\_\_\_\_\_

Has your pet ever bitten anyone? \_\_\_\_\_ What were the circumstances?

\_\_\_\_\_  
\_\_\_\_\_

Has your dog ever climbed or jumped over a fence? \_\_\_\_ How high was it? \_\_\_\_\_

Does your dog have any problems in the following areas:

Mouthing?\_\_\_\_ Houstraining? \_\_\_\_ Barking? \_\_\_\_ Digging? \_\_\_\_ Ignoring  
Commands? \_\_\_\_ Scared of certain noises? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you interested in training classes?

Confirmation \_\_\_\_\_ Agility \_\_\_\_\_ Obedience \_\_\_\_\_ Puppy class \_\_\_\_\_

Fly Ball \_\_\_\_\_ Arena Tennis Ball \_\_\_\_\_

**Pet Information (2<sup>nd</sup> Pet):**

Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: \_\_\_\_\_

Neutered/Spay: \_\_\_\_\_ Birthday: \_\_\_\_\_ Weight: \_\_\_\_\_

**Pet Personality Profile**

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A lover \_\_\_\_

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- Heart murmur or any other circulatory conditions: \_\_\_\_\_  
\_\_\_\_\_
- Arthritis, hip/elbow dysplasia, or any other bone-related conditions:  
\_\_\_\_\_
- Severe separation anxiety: \_\_\_\_\_
- Constipation/loose stool, corpophagy (poop-eating), gas: \_\_\_\_\_  
\_\_\_\_\_
- Dry skin, cracked foot pads, flaky/cracking nails: \_\_\_\_\_  
\_\_\_\_\_
- Eye problems: cataracts, growths, dryness, cherry eye, repeat infections:  
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- Repeat bladder or urinary tract infections: \_\_\_\_\_  
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Was he/she a good group player? \_\_\_\_\_

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\_\_\_\_\_

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Commands? \_\_\_\_\_ Scared of certain noises? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you interested in training classes?

Confirmation \_\_\_\_\_ Agility \_\_\_\_\_ Obedience \_\_\_\_\_ Puppy class \_\_\_\_\_

Fly Ball \_\_\_\_\_ Arena Tennis Ball \_\_\_\_\_

## **Health and Temperament Agreement**

I understand that I am solely responsible for any harm caused by my pet(s) while my pet(s) are attending Bunk and Biscuit and agree to pay any medical expenses for any pet(s) that is (are) harmed by the fault of my pet(s).

I further understand and agree that in admitting my pet(s), Bunk and Biscuit has relied on my representation that my pet(s) is (are) in good health and have not harmed or shown aggression or threatening behavior towards any person or any other pet.

I further understand and agree that Bunk and Biscuit and their staff will not be liable for any problems that develop provided reasonable care and precautions are followed, and I hereby release them of any liability arising from my pet's (pets') attendance and participation at Bunk and Biscuit.

I further understand and agree that any problems that develop with my pet(s) will be treated as deemed best by the staff of Bunk and Biscuit, in their discretion, and that I assume full financial responsibility for any and all expenses involved.

I certify that I have read and understand the rules and regulations set forth on the preceding page and that I have read and understand this arrangement. I agree to abide by the rules and regulations and accept all terms, conditions and statements of this agreement.

Signature of owner:

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Date: \_\_\_\_\_



## Pick Up Authorization

**This form lists individuals who are authorized to pick up the pet when the owner is unable to do so. This form must be included with your enrollment application.**

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Pet(s) Name: \_\_\_\_\_ Breed(s): \_\_\_\_\_

Authorized Persons:

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relation to you: \_\_\_\_\_

\*\*\*\*

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relation to you: \_\_\_\_\_

\*\*\*\*

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relation to you: \_\_\_\_\_

\*\*\*\*

I give permission to the above named individuals to pick up my pet in my absence. I also understand that I must call Bunk and Biscuit ahead of time and give them the pass code to authorize this action. Pass Code: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Absent Owner Treatment Consent Form

To be filled out by the owner and used in case their pet(s) needs emergency care while staying at Bunk and Biscuit.

Owner name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

Contact phone number(s) while you are away:

(\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

Please check one of the following statements:

(\_\_\_\_) Bunk and Biscuit is responsible for my pet(s) while I am away and will be able to make all decisions regarding veterinary care.

(\_\_\_\_) Bunk and Biscuit is responsible for my pet(s) while I am away. For decisions regarding veterinary care, I wish to be contacted. If I cannot be reached, I appoint the following person to act on my behalf:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Finances:

(\_\_\_\_) I authorize any amount necessary for the treatment of my pet.

(\_\_\_\_) I authorize a maximum of \$ \_\_\_\_\_ to be used towards my pet's care.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you!