

Magnolia Kennel - Extended Stay Application

Extended Stay Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Pets Name: _____ Breed.: _____ Color: _____

Dates of Stay: _____
(MK - definition of extended stay 15 days or longer)

Is your pet Chipped YES NO
(If your pet takes medication give directions)

Is your pet on any type of Medication? YES NO

Are you going out of the country? YES NO
Contact Number _____

Vaccination current? YES NO
(Vaccination renewal date must be at least 30 days after end of boarding date)
If so dates: _____

NOTES: _____

References

Please list three references 1 family, 2 friends. (1 of these people must be your emergency contact person)

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Address: _____
Emergency Contact **Yes** **No**

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Address: _____
Emergency Contact **Yes** **No**

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Address: _____
Emergency Contact **Yes** **No**

*******ALL OF THE ABOVE CONTACTS WILL BE VERIFIED*******

Veterinarian Information

Company: _____ Phone: _____

Address: _____ Vets Name: _____

Last time there: _____ Reason: _____ :

Magnolia Kennel USE only: _____

Approved – Yes or No _____ Approved By: _____

Contacted: _____ Date: _____

Vaccination dates ok: _____ Medication: _____ Driver's License Scanned: _____

Known Pet Issues: _____

Notes: _____

Type/Name of Feed _____ CC on File: _____

HV Vet: _____ Phone: _____

Address: _____ Contacted: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to acceptance for extended stay, I understand that false or misleading information in my application or interview may result in early termination of the agreement, I also understand failure to pick up your pet (Abandonment) 5 days after agreed pick up date will result in us contacting Law Enforcement and finding other housing for the pet.

You are financially responsible for all emergency Veterinarian care if so incurred.

You are financially responsible for all boarding fees to include any and all fees after the pick up date if you fail to pick up your pet after the 5 day grace period.

Signature: _____ Date: _____