



APPLICATION INFORMATION

NAME (LAST NAME, FIRST NAME)		
STREET ADDRESS, APARTMENT #		
CITY, STATE AND ZIP		
HOME NUMBER	WORK NUMBER	MOBILE NUMBER
EMAIL ADDRESS (PRIMARY)	COMMUNICATION PREFERENCE (EMAIL OR PHONE)	
SPOUSE/PARTNER NAME (LAST NAME, FIRST NAME)		
WORK NUMBER	MOBILE NUMBER	
EMAIL ADDRESS (PRIMARY)	REFERRED BY (If no referral, how did you hear about us)?	

EMERGENCY CONTACTS/ AUTHORIZATION FOR PICK-UP

EMERGENCY CONTACT NAME / RELATIONSHIP TO OWNER	TELEPHONE NUMBER

RUFF CLUB CREDIT CARD AUTHORIZATION

NAME ON CARD:		
BILLING ADDRESS (IF DIFFERENT FROM ABOVE):		
CARD TYPE:		
CARD # :	EXP DATE:	CCV (Required)

DOG INFORMATION

NAME	BREED	
GENDER	WEIGHT	NYC DOG LICENSE NO. (IF ANY)
DATE OF BIRTH	COLOR/MARKINGS	

HEALTH PROFILE

VETERINARIAN	VETERINARIAN TELEPHONE
IS YOUR DOG SPAYED/NEUTERED?	
VACCINATION INFORMATION: Ruff Club will contact your vet to obtain this info.	
RABIES: _____ (EXPIRATION DATE)	
DISTERMPER/PARVO: _____ (EXPIRATION DATE)	
BORDETELLA: _____ (DATE GIVEN)	
PLEASE LIST ALL HEALTH ISSUES (ALLERGIES, BACK, EYES, HEARING, DIABETES, OTHER)	

FEEDING INSTRUCTIONS

WET BRAND	WET AMOUNT
DRY BRAND	DRY AMOUNT
FEEDING FREQUENCY (C< 97?)	
AM (24-hour care only)	MD (12-1 pm) PM (5-6 pm)
ADDITIONAL FEEDING INSTRUCTIONS	

MEDICATION INSTRUCTIONS

MEDICATION NAME	INSTRUCTIONS (frequency, amount, how to give)

What are the reasons and approximate dates for your last three vet visits?

1)

2)

3)

How long have you had your dog?

Has your dog ever attended dog daycare? If so, where?

Has your dog ever been boarded? If so, where?

Has your dog ever bitten a person? Please describe the circumstances.

Has your dog ever bitten another dog? Please describe the circumstances.

Please initial beside each:

___ The above information is true and correct.

___ I agree to pay for services when they are reserved or rendered. I authorize Ruff Club LLC, its affiliates, and its subsidiaries ("Ruff Club") to charge balances for past due services to the credit card listed above according to Ruff Club's policies.

___ I authorize Ruff Club and its employees to take whatever action they deem reasonably necessary to ensure the safety, security, and health of my dog(s) while under Ruff Club's care.

___ I authorize Ruff Club and its employees to walk my dog off-premises in public streets and parks in the vicinity of Ruff Club.

___ Except to the extent caused by Ruff Club's gross negligence, bad faith, or intentional misconduct, I agree to hold harmless and indemnify Ruff Club and its agents and employees from all liabilities, financial or otherwise, for injuries to myself, my dog(s), or my property, which may arise from services rendered by Ruff Club or as a consequence of my or my dog's association with Ruff Club.

___ Except to the extent caused by Ruff Club's gross negligence, bad faith, or intentional misconduct, I waive, to the maximum extent permitted by law, any and all claims, actions, or demands of any nature, either foreseen or unforeseen, that I may have against Ruff Club and its agents and employees.

___ By signing below, I acknowledge that I have read this agreement and release of liability in its entirety and agree to its terms. I understand that this agreement shall control every time Ruff Club reserves or renders services on my behalf.

Name

Date

New York, NY