



# Boarding Intake Form

Forms can be emailed to [info@mountainpals.com](mailto:info@mountainpals.com) or printed and delivered at the time of your scheduled drop off. Please call 303.507.2001 if you have any questions.

Owners Name(s): \_\_\_\_\_ Email(s): \_\_\_\_\_

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

Physical Address (for pickup/delivery service): \_\_\_\_\_  
DIRECTIONS CAN BE EMAILED TO [INFO@MOUNTAINPALS.COM](mailto:INFO@MOUNTAINPALS.COM) OR TEXTED TO 303.507.2001 IF GPS DOESN'T WORK FOR YOUR HOUSE

May we add you to our email newsletter, to keep you updated on mountain pals? **YES NO ON IT**

Dog's Name(s): 1.	_____	Breed/description	_____	Age:	_____
2.	_____	Breed/description	_____	Age:	_____
3.	_____	Breed/description	_____	Age:	_____

Phone number where owners can be reached in case of emergency \_\_\_\_ + \_\_\_\_\_

OTHER # \_\_\_\_\_

Regular Vet and phone number: \_\_\_\_\_

### FOOD AND MEDICATION

We REQUIRE food to be in a Tupperware to keep it secure. Please label your container your dogs FIRST and LAST names. If food is not in a Tupperware we will provide one at a 10\$ charge. We generally feed dogs twice a day.

How many times per day does your dog eat? **1/day 2/Day** Dog 1 \_\_\_cup(s)/meal \_\_\_cup(s)/meal Dog 2 \_\_\_cup(s)/meal \_\_\_cup(s)/meal  
Dog 3 \_\_\_cup(s)/meal \_\_\_cup(s)/meal

Type of food provided by owner \_\_\_\_\_

Does your dog(s) have any known food allergies? **YES NO**

If yes please explain: \_\_\_\_\_

Does your dog have medication that Mountain Pals will need to administer? **YES NO**

If yes, please indicate:

Dogs Name: \_\_\_\_\_ Medication name \_\_\_\_\_ dose & schedule \_\_\_\_\_

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### ANIMAL ACCESORIES We understand dogs like familiarity but please only provide necessities to their comfort. We hate not getting everything back to you. **Please no bowls. (please label each item)**

Are you leaving a leash? **YES NO** If yes, describe leash \_\_\_\_\_

Please list/describe any items you are leaving with your dog\*

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

\*I understand MOUNTAIN PALS Pet Sitting, LLC is not responsible for items lost, destroyed or damaged

INITIALS \_\_\_\_\_

**ANIMAL BEHAVIOR**

Does your dog(s) get along with other dogs? YES NO SOMETIMES

Can your dog be co-mingled for transport YES NO Unsure

Dogs are comingled within the truck transport. If we have a dog that needs more personal space they gets a front seat. Dogs are expected to get along well with other dogs in this situation. A total of 4 dogs up front in the cab and depending on size 6 can fit comfortably in the truck bed. Comfortable means turn fully around, stand up to full height and lay down. If this is not your dog this may not be the correct situation for your pup.

Is there are instances where your dog does not get along with other dogs please explain.

\_\_\_\_\_

Does your dog(s) interact well with small dogs, including toy breeds? YES NO

\*(We have dogs of all sizes if your dog does not get along well with small dogs or dogs in close quarters (while in the truck for transport) then Mountain Pals may not be the best place for them. )

**Can your dog(s) be off leash? YES NO**

**\*(by circling YES you are giving Mountain Pals permission to have your dog off leash. If your dog proves unreliable when off leash at any time you will not hold Rebecca Cardennis or any representative of Mountain Pals libel if your dog proves unrecoverable. Mountain Pals only takes a very limited number on leash dogs. This is mainly an off leash facility)\***

\_\_\_\_\_ (INITIALS)\*\*\*

Does your dog(s) have a specific command for off leash recall? YES NO Please describe \_\_\_\_\_

Is your dog e-collar trained? **You must give us expressed permission to use an electric collar on your pet in a responsible manner.** YES NO

We prefer to not use them but it is a tool that can be used to keep your animal safe in the forest environment, we prefer collars that offer multiple options such as tone, vibration and shock at variable levels. This tool will be used in a responsible manner and if any signs of harm show on your dog use will be discontinued immediately.

Is your dog crate trained? YES NO UNSURE

\*(We do not regularly crate dogs but if needed can your dog deal well with being put in a wire crate for their own comfort or if needed for their safety. If you answered yes to this question you are giving us permission to crate your dog if needed or short amount of time.

If you answered NO I will never crate your dog. We want them to be happy and not stressed ☺

Does your dog guard food? YES NO

Does your dog guard toys? YES NO

Does your dog(s) know any tricks, like sit, lay down, roll over, drop (or “leave it” for stick play)? YES NO

Please describe tricks and their commands if possible \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONDITIONS**

By signing below I understand that:

1. I have the right to pick up my dog at any time during regular business hours
2. I will be charged for all nights that I have reserved for my dog unless 5 days notice is given.
3. Pickup time for dogs is 9am M-SU before the next billing day start
4. I understand that dogs are co-mingled in the truck and unrestrained while riding in the back of the transport truck.
5. I authorize Mountain Pals to transport my dog to a licensed veterinarian for medical evaluation and/or treatment should it be deemed necessary by an owner or employee of Mountain Pals Pet Sitting. I understand that I will be responsible for all charges related to the medical evaluation and/or treatment. This may not be my regular vet if they are unavailable or to far away at the time of need.

Signature \_\_\_\_\_ Date \_\_\_\_\_



# Owner Liability Waiver and Health Certification

Forms can be emailed to [info@mountainpals.com](mailto:info@mountainpals.com). They must be delivered in digital format. Please call 303.507.2001 if you have any question.

I, \_\_\_\_\_, Owner of  
Dog(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending Mountain Pals Pet Sitting, LLC. And during their outside adventures on or off leash. I recognize that there is an inherent risk of injury, illness, loss or even death in any environment associated with numerous cage-less dogs in daycare and in boarding environments. I also recognize that such risks include, without limitation, injuries or illnesses resulting from fights, rough play, and contagious diseases. Knowing these inherent risks and dangers, I understand that Mountain Pals Pet Sitting cannot be held responsible for any injury, illness, damage or death caused to my dog and that I am solely responsible. I agree to indemnify and release Mountain Pals Pet Sitting harmless from any claims for damage, all defense costs, fees, and business losses resulting from any claim I make or cause to be made against Mountain Pals Pet Sitting for which it, its agents, or employees are not ultimately held to be legally responsible.

2. I understand and agree that The Mountain Pals Pet Sitting, LLC staff may at any time remove a dog from their care for any reason and find a more appropriate situation for my pet while I am away if he/she exhibits behavior which could be harmful to other dogs or staff.

3. I further understand and agree that dogs can sometimes receive minor cuts and scratches while in our care. If a dog becomes otherwise ill or injured and is in need of immediate care, Mountain Pals Pet Sitting will transport the animal to the nearest open and able Veterinary Hospital and attempt to reach the owner while the animal is in transit. If the owner is unreachable, Mountain Pals Pet Sitting will have the veterinarian proceed with any treatment deemed necessary. **Owners will assume all financial responsibility for veterinary treatment. Mountain Pals is happy to cover veterinarian costs if no credit card is provide if needed with the firm understand that the owner will reimburse Mountain Pals Pet Sitting upon pickup of their animal.**

4. I certify that my animals are current and up to date on all their vaccines deemed necessary by their veterinarian and authorize Mountain Pals Pet Sitting, to obtain vaccination information from my dogs Vet as needed. Rabies, Distemper (DHLPP) and Bordetella. Please note that having the Bordetella vaccine is not a guarantee that your dog can not get "kennel cough" but we still highly recommend the vaccine as he is around other dogs. We do everything we can to keep them happy and healthy but dogs do come from many places where they can be exposed to it.

5. I authorize the use of my credit card/care credit card below in the event that my animal needs medical care or any animal my pet may have harmed that is may be in need of medical attention while under the care of Mountain Pals Pet Sitting.

6. I understand this is mainly an off leash dog care facility and that if yes was indeed circled in the off leash statement I am giving permission to Rebecca Cardennis and any Mountain Pals representative to have my dog off leash. If the unforeseen circumstance arises that my dog becomes unreliable off I will not hold Rebecca Cardennis or any other Mountain Pals representative responsive. If dogs off leash reliability has changed owner must notify Mountain Pals in writing with new Mountain Pals paperwork. We only accept a very limited number of ON leash clients.

7. I understand fully that animals are co-mingled within the transport truck and while at the facility.

8. I understand all photos taken of my animal by Mountain Pals are owned by Mountain Pals and can be used for marketing material such as use on all social media or in print materials. We are happy to share them with you in a high-resolution format but Mountain Pals Pet Sitting, LLC, owns all rights of use.

9. In the rare and unfortunate event that your pet dies in our care your pet will be taken to your designated veterinarian and maintained for pick-up or further instruction.

**I certify that I have read and understand the policies of The Mountain Pals Pet Sitting as set forth on the General Information and Policies sheet and that I have read and understand the conditions and statements of this agreement.**

Drop off date and time: \_\_\_\_\_ Pick up date and time: \_\_\_\_\_

**Signature of Owner** \_\_\_\_\_ **Date** \_\_\_\_\_

**All signatures are valid for 6 months of service. All changes to animal instructions must be in written and new paperwork submitted.**

We accept Cash, Check and Visa and MasterCard as payment.

**Credit Card #** \_\_\_\_\_ **Exp Date** \_\_\_\_\_ **Zip Code** \_\_\_\_\_ **Auth code** \_\_\_\_\_

*or Care Credit (Vet only Credit Card)*

Please check this box if you would like to use your Credit Card above for payment for Mountain Pals Pet Sitting LLC services. We can keep it on file for your convenience. Protecting our customers' information and privacy is a top priority.