

The Yuppy Puppy, LLC. Registration Form Updated October 2019

Pet Information

Name: _____ Breed: _____
Sex: () Male () Female
Spayed/Neutered: Yes No
D.O.B. (est.): _____ Weight: _____

Vet Information:

Clinic Name: _____
Rabies Expiration Date: _____

Human (Owner) Information

Name: _____
Address: _____ Zip _____
Cell Phone: _____ Home Phone: _____
Work Phone: _____ Alt. Phone: _____
Email: _____

How would you like to receive reminder notices? (OK to check multiples).

() Phone () Email () Text

Waiver of Liability

I certify that my dog has never been aggressive to people or other dogs, is current on all vaccinations including Rabies, and is currently in good health. I understand that I am solely responsible for any harm caused to other dogs or to humans by my dog. I understand that "The Yuppy Puppy, LLC," its owners and employees will take appropriate care of my pet and do their best to provide a safe environment for them while in their care. I hold harmless "The Yuppy Puppy, LLC," Aquila Brown, Gavin Brown and all employees of "The Yuppy Puppy, LLC" if any injury or death happens to my dog while in their care. I also give "The Yuppy Puppy, LLC" permission to take my dog to an appropriate Veterinary Clinic in case of an emergency while in their care. I will pay for any Veterinary Service at my expense. I will pay for these expenses if it is an Act of God or an injury on any of "The Yuppy Puppy, LLC."s properties. I understand that accidents do happen. I will waive any lawsuits or attorney fees.

Client Signature: _____ Date: _____

Employee Signature: _____ Date: _____

Health Issues we should be made aware of:

Seizures Deaf Blind Diabetic
Allergies (food) (fragrance) (other)