



Boarding & Daycare Co-Mingling Authorization

Client Name: _____ Client # _____

Pet(s): _____

Behavioral: Check any behaviors that apply to your dog(s).

____ My pet is protective of area and/or possessions.

____ My pet has been known to chew bedding, toys, clothing etc.

____ My pet has been known to nip or bite other pets.

____ My pet has been known to nip or bite people.

____ My pet WILL bite or nip other pets.

____ My pet growls, shows teeth and viciously barks at other pets.

____ My pet has never shown aggression towards other dogs and **I authorize my pet to co-mingle or play** with other dogs under the supervision of Red Hill Animal Health Center staff.

Acknowledgment of Risks:

I understand that there are inherent and potential risks involved with interactions between humans and dogs as well as between dogs and other dogs, especially with dogs involved in group play and co-mingling. These risks may involve property damage or bodily injury. The Red Hill staff will make every effort to match personality, size and play-styles of dogs that are placed in playgroups but some risks may occur including, but not limited to dog scratches, nipping or bites.

_____initial

Additional Information: Any other information you would like to tell us about your pet(s).

*If you no longer want your pet to be co-mingling at our facility please inform a staff member when checking your pet into boarding or daycare.

Signature of owner: _____ Date: _____

Location: staff (S:) Kennel