

Mail these four forms to:

Jerrilee Streeter, 24 Willard Avenue, Rehoboth, Ma 02769

## *Club Baron Weekly Request Form*

Reservation dates are subject to approval.

(pet's name): \_\_\_\_\_ would like to participate in the Club Baron Program!

Date of your Club Baron Week(s): \_\_\_\_\_

Number of Extra Days: \_\_\_\_\_

Total Estimate: \_\_\_\_\_

(checks payable to: Jerri Streeter)

Green Airport Arrival Y N

Boston's Logan Airport Y N

**Logan Airport requires reimbursement of fees & car travel time**

Payment in Full: Y / N

Pre-Payment: \_\_\_\_\_ Balance Due: \_\_\_\_\_

(Total payment due **60 days prior** to arrival date)

Today's Date: \_\_\_\_\_

Pet Owner: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

***Pet Boarding Agreement for Home-Stay Pet Care /Jerrilee Streeter***  
(formerly Loving Care Pet Solutions )

**Club Baron Terms:**

**Special dietary** needs are not a problem but there is an additional travel fee, plus the cost of supplies.

**Pick up** and delivery of your pet is available. Within 15 miles of 24 Willard Ave, Rehoboth, Ma, is free. Beyond fifteen miles the travel time is rated at **\$20 for each half hour** in the car.

**Club Baron Plan: \$575/one lock-in rate for 10 consecutive nights.** *Non-refundable.* Payable two months in advance of week selected. All Club activities and travel included in price. (The only exception is Logan Airport Pick-up & Drop-off where airport fees and car travel rates apply.) If your dog stays an odd number of days, the weekly rate *reverts* to the ***Club Baron special daily rate***. For example, a pet staying 12 nights receives the first 10 at Club Baron Weekly rate, and two nights at Club Baron Daily rate.

**Club Baron Special Daily Rate: \$15/night;** comes with our Club Baron Week *only*.

**CANCELLATIONS:** Any cancellations are non-refundable since the time has been exclusively reserved for your pet only.

**Holidays:** Holiday restrictions do not apply to Club Baron Plan.

**Returned Check Fees:** The Client agrees to reimburse for any bank fees on checks returned by the Client's bank for non-payment, and any related fees resulting.

**Pre-existing conditions:** health conditions requiring medical attention, or pets with behavioral issues are arranged with owners on a case by case basis. Hypodermic injections are not administered.

I have read and understand the terms of the Club Baron Boarding Agreement  
Pet Owner: \_\_\_\_\_ Date:

**Tick/Flea Prevention:** all pets are required to have pre-applied tick/flea protection that will last during their length of stay.

## Client Information Sheet

Owner's Name \_\_\_\_\_

Full Address \_\_\_\_\_

Telephone Home \_\_\_\_\_ Cell \_\_\_\_\_

Pet 1 Name \_\_\_\_\_ Sex: M F  
Breed \_\_\_\_\_ Spayed/Neutered Y N

Health Concerns/Special Instructions:

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

Pet 2 Name \_\_\_\_\_ Sex: M F  
Breed \_\_\_\_\_ Spayed/Neutered Y N

Health Concerns/Special Instructions:

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

Veterinarian: \_\_\_\_\_

Vet Address: \_\_\_\_\_

Vet Phone Office \_\_\_\_\_ Cell \_\_\_\_\_

In Case of Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact's Relationship to You: \_\_\_\_\_

How did you hear about Home-Stay Pet Care?

## **Home-Stay Pet Care (formerly Loving Care Pet Solutions)**

**Jerri-lee Streeter** 24 Willard Avenue Rehoboth, MA 02769

508.343.0738

**Pre-existing conditions:** Please contact Jerri Streeter. All health conditions requiring medical attention, or pets with behavioral issues are arranged with owners on a case by case basis.

### **Owner Liability Waiver and Health Certification**

I, \_\_\_\_\_, hereby certify that my dog(s): \_\_\_\_\_ is/are in good health and has/have not been ill with any communicable condition in the last 15 days. I further certify that my dog(s) has/have not harmed or shown aggressive or threatening behavior towards any person or any other dog.

I have read and understand the following:

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending Home-Stay Pet Care. 2. I further understand and agree that in admitting my dog(s) to Home-Stay Pet Care, the staff have relied on my representation that my dog(s) is/are in good health and has/have not harmed or shown aggressive or threatening behavior towards any person or any other dog. Staff may at any time remove a dog from care if he/she exhibits behavior which could be harmful to other dogs or staff. 3. I further understand and agree that Home-Stay Pet Care and its staff will exercise due diligence and reasonable care while caring for my pet, and will not be liable for any problems that may arise. I hereby release of any liability of any kind whatsoever arising from my dog's/dogs' attendance and participation. 4. I further understand and agree that dogs can sometimes receive minor cuts and scratches at care. If a dog becomes otherwise ill or injured and is in need of immediate care, Home-Stay Pet Care will transport the animal to the Warren Animal Hospital or if possible the veterinarian specified by the owner. Staff will attempt to reach the owners while the animal is in transit. If the owner is unreachable, Home-Stay Pet Care will have the veterinarian proceed with any treatment deemed necessary. Owners will assume all financial responsibility for veterinary treatment. I certify that I have read and understand the policies of Home-Stay Pet Care as set forth on the General Information and Policies sheet and that I have read and understand the conditions and statements of this agreement, including the following: RESERVATIONS: Required. Cancellations with less than 24 hours notice will be charged a full day's fee. Holiday reservations are pre-paid and non-refundable upon cancellation.

Dated \_\_\_\_\_ Signature of Owner \_\_\_\_\_