



WESNER GROVE KENNELS, LLC

15657 460TH Avenue

Easton, MN 56025

Phone: (507) 525-3890

wesnergrovekennels@gmail.com

APPLICATION FORM

Your Name(s): _____

Address: _____ City _____ State _____ Zip _____

Phone () _____ - _____ (work/cell/other)

Email Address: _____

In Case of Emergency (Contact):

Name: _____

Address: _____ City _____ State _____ Zip _____

Phone () _____ - _____ (work/cell/other)

Veterinarian:

Name: _____ Phone () _____ - _____

Address: _____ City _____ State _____ Zip _____

PET INFORMATION:

Name: _____ Sex: M / F Spayed/Neutered: Y / N

Age: _____ Birthday: _____ Breed: _____

Feeding Schedule: _____

Is your dog allowed to have treats? Y / N

Does your dog have any kinds of people he/she automatically fears or dislikes? Y / N

If yes describe: _____

Has your dog ever bitten someone? Y / N

Has your dog ever been in a fight or bitten another dog? Y / N

Has your dog ever escaped or attempted to escape by digging/jumping or climbing fences? Y / N

Do you walk your dog? Y / N How often?_____ Distance?_____

Does your dog have a circumstance or situation that he/she is frightened of? Y / N

If yes describe: _____

Does your dog have any health concerns that you are aware of? Y / N

Describe: _____

Does your dog have any medical restrictions on his/her activities? Y / N

Describe: _____

Is your dog currently on any medication? Y / N

Describe: _____

Does your dog have any allergies? Y / N

Describe: _____

Does your dog receive flea and tick preventative? Y / N

Brand: _____ Type:_____ Frequency:_____

Is there anything else that you believe we should know about your dog?_____

MEDICAL RELEASE FORM

This is a required form for all Wesner Grove Kennels, LLC participants receiving services.

First and foremost the safety and well being of your pet(s) is of the highest importance. Insuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously. We do our best to have our pet parents screen for pre-existing health conditions but some factors may be beyond our control. In the event that a medical emergency arises while a pet is at our facility or participating in a service that we provide it is imperative that we are immediately able to get them medical treatment at the closest available facility. We will call ahead to the veterinary offices in closest proximity geographically to us to insure they can handle the emergency present. Your pet will be rushed to the closest available facility for treatment and you will be notified. We notify the owner after we have secured a medical treatment center for the animal to avoid delays that may be caused by emotion on the part of the owner. Our goal is to get your pet medical attention as quickly as humanly possible, and any distractions may interfere with that process.

For that reason, it is a requirement to have our pet parents sign this form.

I understand that in the event of a medical emergency that Wesner Grove Kennels, LLC, at its sole discretion, deems to need the immediate attention of a licensed veterinarian, I authorize Wesner Grove Kennels, LLC to seek medical attention at the closest available veterinary facility. I further agree that I am financially responsible for any medical treatment my pet(s) receives as a result of a medical emergency while attending services provided by Wesner Grove Kennels, LLC

Signature of Owner _____ Date _____

Printed Name _____

PET CARE AGREEMENT

Your Name(s): _____

Address: _____ City _____ State _____ Zip _____

Phone () _____ - _____ (work/cell/other)

Dog's Name: _____ Age: _____ Breed: _____

1. I further understand that Wesner Grove Kennels, LLC has relied upon my representation that my dog is in good health and has not injured or shown aggression or threatening behavior to any person or dog in admitting my dog for services at their facility.
2. I further understand that their owners, staff, partners and volunteers, will not be liable, financially or otherwise, for injuries to my dog, me or any property of mine while my dog is participating in services provided by Wesner Grove Kennels, LLC. I hereby release Wesner Grove Kennels, LLC of any liability of any kind arising from my dog's participation in any and all services provided by Wesner Grove Kennels, LLC.
3. I further understand and agree that any problems with my dog, behavioral, medical or otherwise will be treated as deemed best by staff of Wesner Grove Kennels, LLC in their sole discretion, and in what they view as the best interest of the animal. I understand that I assume full financial responsibility and all liability for any and all expenses involved in regards to the behavior and health of my dog.
4. I further understand that there are risks and benefits associated with group socialization of dogs. I agree that the benefits outweigh the risks and that I accept the risk. I desire a socialized environment for my dog while attending services provided by Wesner Grove Kennels, LLC and while in their care. I understand that while the socialization and play is closely and carefully monitored by Wesner Grove Kennels, LLC staff to prevent injury, it is still possible that during the course of normal play my dog may receive minor nicks and scratches from roughhousing with other dogs. Any injuries to my dog will be pointed out by staff upon pick-up.
5. I understand by allowing my dog to participate in services offered by Wesner Grove Kennels, LLC I hereby agree to allow Wesner Grove Kennels, LLC to take photographs or use images of my pet in print form or otherwise for publication and/or promotion.
6. I further understand that I am solely responsible, financially or otherwise, for any harm or damage caused by my dog while my dog is attending any services provided by Wesner Grove Kennels, LLC.
7. I understand that if my dog is not picked up on time or by a date specified in a separate agreement I hereby authorize Wesner Grove Kennels, LLC to take whatever action is deemed necessary for the continuing care of my dog. I will pay Wesner Grove Kennels, LLC the cost of any such continuing care upon demand by Wesner Grove Kennels, LLC. I understand that if I do not pick up my animal, Wesner Grove Kennels, LLC will proceed according to the guidelines provided by the statute for abandonment of animals by owner. I also acknowledge that I will be fully responsible for all attorneys' fees and associated costs if I abandon my dog.

Signature of Owner: _____ Date: _____

Printed Name: _____