



BARK Chicago, Inc.SM

✿ LUXURY Suite Boarding ✿ Daycare
✿ Training ✿ Walking ✿ Grooming ✿ Transportation
✿ SpaBARK!SM Mobile Grooming

BARK Chicago, Inc. - Enrollment Application - fax: 312.850.4943
Service Facility: BUCKTOWN _____ WEST LOOP _____

How did you hear about BARK's Great Service? _____

Client Information...Please print legibly...

First Name: _____ Last: _____
Spouse/Emergency Contact: _____ Cell: _____
Address: _____ Unit: _____
City: _____ State: _____ Zip: _____
Home Number: _____ Cell: _____ Work: _____
Email address: _____

1st Dog's Info: Name: _____
Breed: _____ Color: _____ Weight: _____
Spayed/Neutered: YES NO DOB: _____ Male / Female
Medications OR VIP information on my dog _____

Feeding: _____ Cups _____ AM _____ PM
SPECIAL FEEDING INSTRUCTIONS: _____

2nd Dog's Info: Name: _____
Breed: _____ Color: _____ Weight: _____
Spayed/Neutered: YES NO Age: _____ Male / Female
Medications OR VIP information on my dog _____

Feeding: _____ Cups _____ AM _____ PM
SPECIAL FEEDING INSTRUCTIONS: _____

*Account Password: Please specify a password for any person authorized to pickup your pet from BARK should the need arise: _____

Veterinarian Information:

VET Name: _____

Address: _____

Contact Number: _____

***Please FAX your pet's most recent vaccination history to 312-850-4943!**

Required Vaccinations for service...1. Rabies...2. Distemper/Parvo... 3. Bordetella 4. Annual Fecal Exam Showing Parasite FREE

***ATTENTION! City of Chicago Residents ..As of April 1, 2007 Any animal requiring daycare / boarding services at any Chicago Animal Care Facility such as BARK Chicago, Inc. MUST have a valid City of Chicago Dog License & Parasite FREE health certificate from a licensed veterinarian on file for services to be rendered...**

Payment Authorization:

CARD (Circle One): VISA MASTERCARD DISCOVER EXP ____ / ____

Name (as it appears on card) _____

Card Number: _____

CVV (last (3) digits located on the signature line on the back of your card): _____

Billing Address (if same as listed on Page 1 just put "Same"): _____

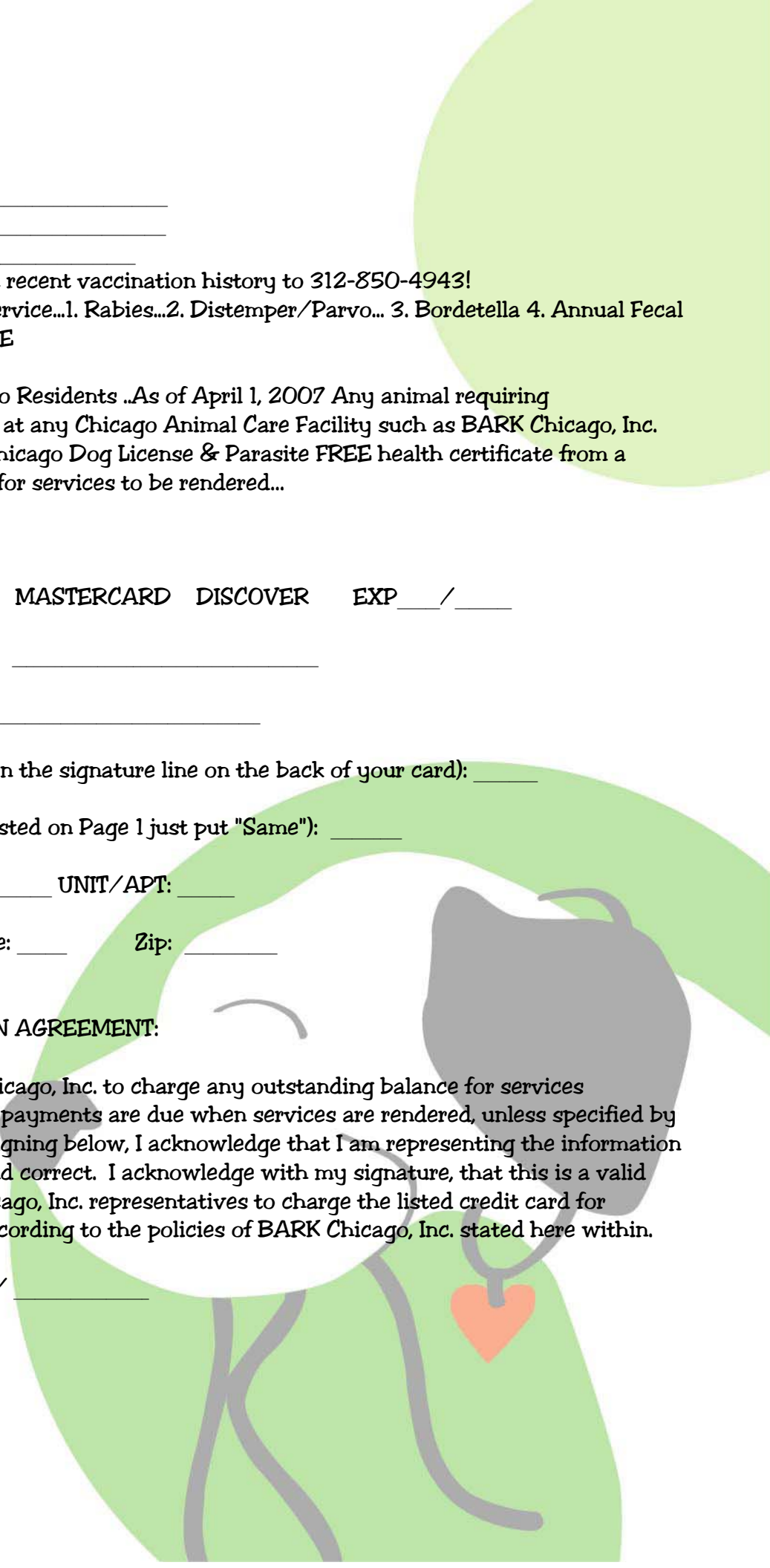
Address: _____ UNIT/APT: _____

City _____ State: _____ Zip: _____

PAYMENT/AUTHORIZATION AGREEMENT:

I hereby authorize BARK Chicago, Inc. to charge any outstanding balance for services rendered on my account. All payments are due when services are rendered, unless specified by BARK Administration. By signing below, I acknowledge that I am representing the information on this application is true and correct. I acknowledge with my signature, that this is a valid authorization for BARK Chicago, Inc. representatives to charge the listed credit card for services rendered and/or according to the policies of BARK Chicago, Inc. stated here within.

_____/_____
Owner Signature / Date



Payment , Scheduling & Client Agreement(s): (Please Read & Initial After Each)

1. I understand all services rendered are paid IN ADVANCE for initiation & continuation of daycare service. Accounts are recharged in packs of 10/20 as so agreed between myself & BARK Chicago administration after 9th visit is used and 1 visit remains. If I decide I am canceling service I MUST notify BARK Chicago Administration 1 week prior to package completion. ____

2. All daycare sessions may be used, but all monies in event of cancellation are NON-Refundable. I understand I must cancel the end of my current daycare package in writing, email to BARK Chicago administration. BARK representatives reserve the right to issue credits to client's accounts at BARK's discretion. In the event of service suspension all credits must be used within 60 days or credits are forfeited. ____

3. **BOARDING Cancellation Policy:** BARK Chicago has a (1) business day cancellation policy for general boarding stays, and a (7) business day cancellation policy on holiday boarding stays recognized by the US Postal Service. ****Except for the holiday period beginning November 20th-November 30th & December 22nd-January 2nd, a (14) business day cancellation policy is in effect. If you do NOT cancel your reservation in accordance within stated time periods you will be charged for the reservation in its entirety. Please understand boarding space is in high demand & we strictly adhere to this policy.** ____

****For the holiday period beginning November 20th-November 30th & December 22nd-January 2nd, Please be advised that a 50% NON-REFUNDABLE deposit will be required to book & hold your reservation.** ____

***Late Checkout/BOARDING...Weekday boarding checkout is 10AM; Weekend boarding checkout is 12 noon...After checkout times a \$20 late checkout fee will be applied to each reservation, as dogs in house must be counted in daycare totals. *Please check with staff for special Holiday checkout hours.** ____

4. **DAYCARE Cancellation Policy:** Due to NEW City of Chicago daycare requirements all daycare reservations MUST be cancelled within 1 business day of service or the clients account will be charged or credit forfeited as a NO CALL/NO SHOW as space is reserved and held. ____

5. I authorize BARK Chicago, Inc. To charge my credit card for any outstanding balance(s) on my account. ____

6. I understand BARK Chicago, Inc., will charge my account a \$25 NSF Fee for any check returned for non-sufficient funds. ____

7. I expressively waive & relinquish any & all claims against BARK Chicago, Inc., it's employees & representatives, except those arising from negligence on the part of BARK Chicago, Inc., exclusively. ____

8. I understand BARK Chicago, Inc., reserves the right to terminate service to myself & my pet at any time, for any reason. ____

9. I represent legal ownership of dog(s) listed. I have disclosed to BARK Chicago, Inc., all known behavioral problems including but not limited to history of biting, aggression towards people or animals. I understand BARK Chicago, Inc. & its representatives reserve the right to refuse service & cancel all future service should any altercations occur. I understand in the event said animal shows aggression towards staff or other animal clients, BARK Chicago, Inc., may relocate my animal to a veterinarian facility for secure and separate care to create a safe environment for my animal in its entirety. _____

10. I agree said animal has NOT been exposed to the Distemper/PARVO virus to my knowledge ever since ownership of said animal. I understand Distemper/PARVO virus may be shed for approximately (1) year after treatment and could endanger any animal in BARK Chicago's care leading up to death of any animal exposed due to withholding information for the purpose of acquiring service. _____

11. Each client will provide proof of current vaccinations & parasite free waiver to BARK Chicago, Inc. prior to service. * Note-Beginning April 1, 2007 City of Chicago residents must acquire a City of Chicago dog license & provide said information prior to their scheduled service or BARK Chicago, Inc. reserves the right to refuse service of said animal. _____

12. I agree in the event of any medical situation or development of illness requiring medical attention, BARK Chicago representatives may obtain proper veterinarian care up to emergency care & treatment deemed necessary for the safety, health & well being of said animal. I understand I am liable for any medical care expenses incurred for my animal or any damages that result from injuries caused by my animal exclusively to staff or another clients animal. _____

13. I understand BARK Chicago, Inc. is a cage-free & supervised daycare facility. I understand my dog may play with, but not limited too, tennis balls, large balls, rubber kongs & other toys deemed exclusively for dogs. I have disclosed to BARK Reps. If my dog may NOT play with any said or specified toys based on prior experience. I understand my dog may experience sore muscles, raw paw-pads, knick, scratches etc. from playing outdoors & with other animals. I waive and relinquish any & all injury claims made against BARK Chicago, Inc., resulting from these interactions/activities. _____

14. I understand hours of operation are Monday-Friday 7AM-7PM, Saturday & Sunday 8AM-5PM. Clients picking up 15 minutes late will be charged a \$10 late fee to their account on file. Clients picking up 30 minutes late will be charged a \$20 late fee to their account.... Clients NOT picking up said animal after 30 minutes will be boarded overnight according to overnight boarding rates with no dispute as per agreement. *PLEASE NOTE! : Clients requesting special pickup arrangements after normal business hours or on holidays closed to public will be on a as requested basis, and will incur an additional \$25 fee per reservation.* _____

By initialing each guideline I acknowledge to the terms & agreements of said cancellation, scheduling, & payment policies of BARK Chicago, Inc. I have read this agreement in its entirety & agree to comply to said terms & agreements.

Client Signature: _____ Date: _____