

Bendigo Animal Welfare & Community Services

caring with compassion

Pet Boarding Agreement

Thank you for your inquiry regarding pet boarding for your client. Please complete and return this Agreement to admin@bawcs.org.au Questions: call us 0417 382 741

Please note BAWCS must be notified immediately should your client / patient be transferred to another Agencies care with the new contact details.

PLEASE ENSURE YOU COMPLETE ALL DETAILS ON THIS FORM - THANK YOU!

Organisation name:	
Address including Post Code	
Primary contact for client: (your name / title)	Telephone: (In particular for emergency contact if required) Email:
Timeframe care required for: Please note the maximum time is 3 months. After this time pet must be picked up or BAWCS <u>may</u> be able to accommodate rehoming.	
Pets/s details:	
Name: Age:	Vaccination Date:
Description: (Breed / colour / sex)	Health issues: YES / NO (If yes, provide details)
Temperament: (shy/likes being held/walks on lead /good with other animals etc.)	Microchipped: YES / NO Desexed: YES / NO Current diet (wet / dry food – brand/s)
Indoor / outdoor pet (circle)	
Name: Age:	Vaccination Date:
Description: (Breed / colour / sex)	Health issues: YES / NO (If yes, provide details)
Temperament: (shy/likes being held/walks on lead /good with other animals etc.)	Microchipped: YES / NO Desexed: YES / NO Current diet (wet / dry food – brand/s)
Indoor / outdoor pet (circle)	

Reg No: A0045039R

Terms of Boarding Agreement

(Client or provider to complete)

I, agree to Bendigo Animal Welfare & Community Services (BAWCS) caring for my pets at 488 Millwood Road Huntly North for a period		
of days		
INOUT		
I understand that at the end of this period of time, should I require my pet/s to be boarded longer, I must pay for the agreed period in advance.		
1. I acknowledge I am required to drop off and pick up my pet/s from 488 Millwood Road Huntly Nth in normal operating hours Monday to Friday between 9am and 10am.		
 I agree to pay \$7.50 per pet per day (cat) and \$10 per pet per day (dog) 2 weeks in advance at time of check in and to keep the payments two weeks in advance at all times. Shorter periods, payment required in advance. 		
3. I agree to allow BAWCS to make the decision for emergency veterinary care for my pet/s without prior consultation with me if I cannot be contacted.		
4. I agree to pay up to \$veterinary costs on top of the agreed boarding fee should emergency care be required.		
 I acknowledge that BAWCS will take all steps to inform me/the agency immediately if any veterinary treatment is required and undertaken by BAWCS veterinarian if I have not been able to be contacted. 		
6. I acknowledge that whilst every care will be taken to care for my pet/s, I agree to indemnify BAWCS against all claims should an accident occur resulting in the death or injury of my pet/s, or should my pet/s be lost or stolen.		
7. I acknowledge that BAWCS will advise me/agency immediately should my pet/s be lost or stolen.		
8. I agree to advise BAWCS immediately should I/the agency change my contact details provided in This Agreement.		
9. I agree to immediately advise BAWCS should my client / patient change Agency care.		
10. The following items are being provided with my client / patient's pet/s:		
Any other information:		
Signature Print Name		
Agent for BAWCS Date:		

ABN 62 708 178 788 Reg No: A0045039R

ABN 62 708 178 788

Reg No: A0045039R