

# Repti Zen Form



## Client Details:

Name .....

Address .....

Postcode .....

Contact Number .....

Email .....

## Emergency Contact details:

1.

Name .....

Contact Number .....

2.

Name .....

Contact Number .....

<p>I <b>Do / Do Not</b> give my full consent for my dog / s to be walked off the lead.</p> <p>Sign</p> <p>_____</p>	<p>I give permission for my dog's name and photograph to be used on social media and on Repti Zen Website</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p><b>Services(s) Required:</b></p> <p><input type="checkbox"/> Dog Walking</p> <p><input type="checkbox"/> Dog Boarding</p> <p><input type="checkbox"/> Reptile Boarding</p> <p><input type="checkbox"/> Pet Day Care</p> <p><input type="checkbox"/> Pet Drop-in</p> <p><input type="checkbox"/> School Drop-In</p>	<p><b>Veterinary Release Form</b></p> <p>In my absence I hereby authorise Repti Zen to be caring for my Animal(s) and they have permission to transport them to the veterinary surgery listed below for treatment if required.</p> <p>I will be responsible for the Vet payment. I understand that Repti Zen assumes no responsibility of the animal(s) and is released from all liability related to the transport, treatment and expense once in the care of the veterinary Surgery.</p> <p>Vet Practised Used</p> <p>.....</p> <p>Address</p> <p>.....</p> <p>Postcode</p> <p>.....</p> <p>Contact Number</p> <p>.....</p>

<b>Pet Details:</b>		<b>Pet Details:</b>	
Name .....		Name .....	
Animal .....		Animal .....	
Breed .....		Breed .....	
D.O.B ..... Age .....		D.O.B ..... Age .....	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Neutered/Spayed <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Neutered/Spayed <input type="checkbox"/>
Fully Vaccinated Yes <input type="checkbox"/> No <input type="checkbox"/>	Date of Last Vaccination .....	Fully Vaccinated Yes <input type="checkbox"/> No <input type="checkbox"/>	Date of Last Vaccination .....
Flea/Wormed Treatment Up to Date Yes <input type="checkbox"/> No <input type="checkbox"/>		Flea/Wormed Treatment Up to Date Yes <input type="checkbox"/> No <input type="checkbox"/>	
Name of Flea Treatment Given .....		Name of Flea Treatment Given .....	
ID Tag Yes <input type="checkbox"/> No <input type="checkbox"/>	Microchipped Yes <input type="checkbox"/> No <input type="checkbox"/>	ID Tag Yes <input type="checkbox"/> No <input type="checkbox"/>	Microchipped Yes <input type="checkbox"/> No <input type="checkbox"/>
Microchip Number .....		Microchip Number .....	
How long have you had your Pet? .....		How long have you had your Pet? .....	
<b>What is your pet(s) housed In?</b> Wooden Vivarium. <input type="checkbox"/> Glass Terrariums. <input type="checkbox"/> Mesh Terrariums. <input type="checkbox"/> Monk field Vivarium <input type="checkbox"/> Acrylic Terrariums. <input type="checkbox"/> Tortoise Table <input type="checkbox"/>		<b>What is your pet(s) housed In?</b> Wooden Vivarium. <input type="checkbox"/> Glass Terrariums. <input type="checkbox"/> Mesh Terrariums. <input type="checkbox"/> Monk field Vivarium <input type="checkbox"/> Acrylic Terrariums. <input type="checkbox"/> Tortoise Table <input type="checkbox"/>	
What size is your pet(s) home? .....		What size is your pet(s) home? .....	

<p>Has your pet recently seen a Veterinary Surgery?          Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Has your pet recently seen a Veterinary Surgery?          Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If Yes Why?          .....</p>	<p>If Yes Why?          .....</p>
<p>How often do you handle you Pet(s)          .....</p>	<p>How often do you handle you Pet(s)          .....</p>
<p>How often do they require a clean?          .....</p>	<p>How often do they require a clean?          .....</p>
<p>What substrate do they require?          .....</p>	<p>What substrate do they require?          .....</p>
<p>What food do they eat?          .....</p> <p>How Often?          .....</p> <p>Do they have any Treats?          .....</p> <p>What treats are they allowed?          .....</p>	<p>What food do they eat?          .....</p> <p>How Often?          .....</p> <p>Do they have any Treats?          .....</p> <p>What treats are they allowed?          .....</p>
<p><b>Medical History</b></p>	<p><b>Medical History</b></p>
<p>Known Allergies (if any)          .....</p>	<p>Known Allergies (if any)          .....</p>
<p>Health Notes / Medical History          .....</p>	<p>Health Notes / Medical History          .....</p>
<p>Behaviour Notes          .....</p>	<p>Behaviour Notes          .....</p>

<p><b>Feeding Instructions for Boarding (Time, Amount etc)</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p><b>Feeding Instructions for Boarding (Time, Amount etc)</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>Other boarding instructions e.g. where they sleep at home, any specific behaviours they have or special requirements they need</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>I _____ understand that if I have my service with Repti Zen, there may / will be other animals from other families at the same time</p> <p><b>Signed</b> _____</p>	<p><b>Other boarding instructions e.g. where they sleep at home, any specific behaviours they have or special requirements they need</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>I _____ understand that if I have my service with Repti Zen, there may / will be other animals from other families at the same time</p> <p><b>Signed</b> _____</p>

Terms and conditions

- I Agree to provide / arrange for keys to be available for Repti Zen ahead of the service being undertaken (if required)
- I Authorise Repti Zen to obtain any emergency Veterinary care that may be necessary whilst my Pet(s) are in their care; and accept full responsibility for all costs related to this emergency care. I authorise Repti Zen to use an alternative Veterinarian in an event that my regular veterinarian is unavailable, or the urgency of the situation necessitates this. Repti Zen will endeavour to contact me prior to obtaining emergency care.
- I will be responsible for all medical expenses and damages / claims resulting from an injury to the dog walker / carer or other people / animals by my dog(s) / animal.
- Appointments can be cancelled free of charge up to 24hr prior to the appointment, a 50% will be required if cancelled with 24hr of the appointment.
- I agree to pay Repti Zen In full either in Advance or upon collection / Return of my pet(s).
- Repti Zen will inform you or any incident, or unusual / unacceptable behaviours involving your pet(s) whilst in our care.
- I understand that all photographs / Videos taken whilst my pet(s) in the care of Repti Zen are of copyright Legislation.
- I understand that if I have my pet(s) with Repti Zen; there may / will be other pet(s) from other families at the same time.
- I accept if I require Repti Zen services at short notice e.g. less than 24hr, I may be charged a higher rate.
- I accept that the boarding payment rate is per 24hr. If I collected my pet(s) 3 hours or more after this allotted time I will be charged a minimum of £10 for the extra hours of care provided.

Print Name .....

Signed ..... Dated .....

Repti Zen Signed ..... Dated .....

Repti Zen  
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