New Tricks: Puppy and Dog Training LLC Dog Drop-in Form

Owner Name(s):_____

Address:_____

Phone Number: _____Secondary Phone Number:_____

Email Address:_____

Emergency Contact Name:_____

Emergency Contact Phone Number:_____

Pet Name:_____ Breed:_____

Age:_____ Sex: M/F Weight:_____ Spayed/Neutered: Yes/No

Microchip#:_____ Name Tag: Yes/No

Colors/Markings:_____

Dog Vaccines: DHLPP ☐ Yes ☐ No
Bordetella ☐ Yes ☐ No ☐

Rabies ☐ Yes ☐ No
Flea and Tick Prevention ☐ Yes ☐ No

Please provide a copy of your dog's vaccines before your scheduled consultation. These may be hard copies or digital. You may email digital to newtrickstraining1@gmail.com

Known Medical Conditions:_____

Primary Vet Name:_____ Clinic:_____

Vet Phone Number:_____Vet Address:_____

Preferred Emergency Vet:_____

Emergency Vet Phone Number:_____

I AUTHORIZE CAREGIVER TO SEEK MEDICAL CARE IF NEEDED:
(SIGNATURE)_____ Date:_____

Emergency Spending Limit: $_____

Food Brand/Type:_____

Amount:_____ Frequency:_____

Treats Allowed: Yes/No

Allergies/Diet Restrictions:_____

Medications Name:_____

Dosage:_____ Schedule:_____

How to Administer:_____

Supplements/Topicals:_____

Temperment:_____

Aggression History:_____

Fear Triggers:_____

Play Preferences:_____

Furniture Allowed: Yes/No

Leash Behavior:_____

Entry Method:_____

Will We be Receiving a Key? Yes/No

Alarm Code/Instructions:_____

Door/Gates Rules:_____

Crate: Yes/No

Crate Location:_____

Special Crate Instructions:_____

Leash/Harness/Poop Bag Location:_____

What Does the Dog Use to Walk with?:_____

Potty Schedule:_____

Potty Signs:_____

Yard Rules:_____

Walking Routes:_____

_____

Areas to Avoid:_____

Photo/Video Permission: Yes/No

Signature: _____ Date: _____

Printed Name: _____

Payment Policy – Dog Drop-In Services

To ensure smooth scheduling and reliable service, the following payment policy applies to all drop-in visits:

Payment Due

Payment is due at the time of booking for single visits or in advance for multi-visit packages. Services will not be provided without payment.

Accepted Payment Methods

We accept cash, credit/debit cards, bank transfers, and approved digital payment apps.

Late Payments

Invoices not paid within 7 days of the due date will incur a $10 late fee. Continued non-payment may result in suspension of services until the balance is paid in full.

Refunds & Credits

Refunds are only issued for services canceled according to our Cancellation Policy. If you cancel a prepaid package visit within the allowed cancellation window, the value will be credited toward a future booking.

Returned Payments

A $25 fee will be applied for returned checks or failed transactions.

Tipping

Tips are never required but are always appreciated. 100% of tips go directly to your pet care provider.

Client Acknowledgement

I have read and agree to the Payment Policy outlined above.

Signature: _____ Date: _____

Printed Name: _____

Key Handling Policy – Dog Drop-In Services

1. Key Storage & Identification

All client keys will be stored securely when not in use. Keys will be labeled with a unique client code — never with your name, address, or other identifying information.

2. Access & Use

Keys will only be used by your assigned pet care provider for the purpose of scheduled drop-in visits. No unauthorized person will be given access to your home. If an electronic code, smart lock, or garage opener is provided instead of a physical key, it will be treated with the same level of security and confidentiality.

3. Locking Procedures

Caregivers will ensure all doors, gates, and windows are locked as instructed before leaving your property after each visit. Any issues with locks, alarms, or home security will be reported to you immediately.

4. Key Returns

Keys will be returned to you upon request, termination of services, or after the final scheduled visit. Keys can be returned in person or via a mutually agreed secure method. If mailing keys, the client assumes responsibility for mail

delays or losses.

5. Lost or Damaged Keys

If a key is lost or damaged while in our possession, we will notify you immediately and assist with replacement at our expense.

6. Emergency Access

In the event of an emergency (pet illness, injury, or home emergency such as fire or flooding), we will use your key to enter your home to provide necessary care or contact emergency services.

Client Acknowledgement

I have read and agree to the Key Handling Policy outlined above.

Signature: _____ Date: _____

Printed Name: _____

Cancellation Policy – Dog Drop-In Services

To provide the best service to all clients and ensure fair scheduling, the following cancellation policy applies to all drop-in visits:

Notice Requirement

Cancellations must be made at least 24 hours before the scheduled drop-in visit time.

Late Cancellations

Any cancellation made less than 24 hours before the scheduled visit will be charged the full service rate.

No-Shows

If we arrive for a scheduled visit and are unable to access your pet or home due to client error (locked out, incorrect key/code, etc.), it will be considered a no-show and billed at the full rate.

Emergency Exceptions

We understand emergencies happen. Exceptions to this policy will be considered on a case-by-case basis for unforeseen situations such as medical emergencies, severe weather, or other unavoidable circumstances.

Company Cancellations

If we must cancel your scheduled visit with less than 24 hours' notice (excluding emergencies beyond our control), you will receive a $5 credit applied toward your next drop-in service.

Rescheduling

Visits canceled with at least 24 hours' notice may be rescheduled based on availability without penalty.T

Client Acknowledgement

I have read and agree to the Cancellation Policy outlined above.

Signature: _____ Date: _____

Printed Name: _____

Liability

The undersigned legal owner or agent of the abovementioned dog(s), having carefully read and fully understood this agreement, hereby waives and releases New Tricks: Puppy and Dog Training, its officers, agents, and employees from any liability for any loss, injury, illness, or damage that may occur during the course of providing drop-in services. This includes, but is not limited to, injury or loss due to disease, dog bite, scratches, the animal running away, ingestion of foreign objects, accidents during play, slips or falls, injuries during walks, or other incidents that may occur whether indoors, outdoors, on the owner's property, or during transport. Drop-in services may include, but are not limited to letting the dog(s) outside for a potty break, providing fresh water, feeding, taking them for a short walk, engaging in playtime, or other owner-requested activities. The owner acknowledges that these services are not formal training sessions unless specifically stated otherwise and understands that the provider will use reasonable care, but cannot guarantee the health, safety, or behavior of the dog(s). The owner also agrees to indemnify and hold harmless New Tricks: Puppy and Dog Training from any and all claims due to damage, injury, or loss the pet may cause to any person, other animal, or property during or after services are rendered. The owner specifically acknowledges the inherent risks of allowing their dog to interact with other animals, people, or environments, and accepts full responsibility for their dog's behavior at all times. The owner understands that pets may behave unpredictably and that accidents, injuries, or escapes can occur even when reasonable precautions are taken. All payments for drop-in services are non-refundable once the service has begun.

Signature: _____ Date: _____

Printed Name: _____

Scheduling

Please list your available days and times to schedule the consultation. The consultation will be a meeting with your walker/trainer to go over the information you filled out on this form, it will also include any additional questions your walker/trainer might have. This will also be a great opportunity for you to meet with them, and for your walker/trainer to get to know your dog(s) prior to drop ins. Also, if a key is being provided we ask to have that handed over at the consultation to not delay any scheduling with drop ins. Payment for the consultation must be completed at the time of scheduling. We look forward to working with you and your pets!

_____

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