

We dedicate our lives to providing rescue, shelter and adoption services for reptiles and amphibians in Nova Scotia

Ssafe Haven Society

for Reptiles and Amphibians

Denise McKay dryder@eastlink.ca Lisa Balcom lisabalcom@eastlink.ca For more information please visit www.petfinder.com/shelters/NS17.html

CONSENT FORM FOR BOARDING

Date: _____ Pet's Name(s): _____

Age(s): _____ Sex: _____

Owner's Name: _____

Owner's Address: _____

Owner's Telephone Numbers: _____

Regular Veterinarian: _____

Known Illnesses/Medications: _____

Special Instructions: _____

Caretaker's Name: _____

Drop off Date: _____ Pick Up Date: _____

Ssafe Haven Society for Reptiles and Amphibians
 711 Kearney Lake Road, Bedford, Nova Scotia, B4B 1E2
 Please contact Denise McKay at dryder@eastlink.ca or Lisa Balcom at lisabalcom@eastlink.ca

1. I certify that I am the sole, rightful owner of this reptile/amphibian, free and clear of all other interests. I am 18 years of age or older.
2. I hereby forever release, discharge and agree to hold harmless and indemnify the Ssafe Haven Society for Reptiles and Amphibians, its board of directors, its members, officers, and agents from all claims, demands, actions, causes of action, or liability of any kind arising as a result of or in connection with the boarding or other disposition of the above named reptile/amphibian.
3. Ssafe Haven Society for Reptiles and Amphibians will take every precaution to ensure my pet's health and safety; however, I understand that unforeseen conditions may arise during my pet's stay. Reasonable efforts will be made to contact me to explain these conditions and obtain my instructions regarding them. However, if the efforts are unsuccessful, I authorize all medical investigations, procedures, treatments and / or medications as deemed appropriate by the caretaker. I authorize my pet to be seen and treated by a Veterinarian if the caretaker deems this necessary. I realize there is no guarantee as to the animal's condition or the outcome of any medical treatment.
4. In the event that medical treatment becomes necessary for my pet while in the care of the Ssafe Haven Society for Reptiles and Amphibians, I authorize the Ssafe Haven Society for Reptiles and Amphibians to spend a maximum of \$ _____ and charge my credit card accordingly. I understand that my personal information will be kept confidential and my credit information will be destroyed when I pick up my animal.
5. If my pet is not collected within 7 days of the arranged pick up date and no effort has been made to contact the caretaker to make alternate arrangements, my pet will become the sole custody of the Ssafe Haven Society for Reptiles and Amphibians. All monies owing, including fees and costs relating to the boarding and adoption, shall be payable by the owner forthwith. If the costs are not paid as provided above, legal proceedings will be instituted without further notice.
6. In the unfortunate event that my animal is suffering and I cannot be reached within a reasonable amount of time, for humane reasons I hereby consent to euthanasia to be performed on my animal described above.
7. I certify that all the information I have given above is true and complete and I have not willfully concealed any information about this reptile/amphibian. I have read and understand this authorization form.

 Owner/Authorized Agent Signature credit card type, number, expiry

 Witness