

SERENITY PAWS LODGE LLC

Dog Boarding • Personalized Care • A Peaceful Place for Every Paw

VIRGINIA CONSUMER NOTICE

NOTICE

The boarding of animals is subject to Article 4 (§ 3.2-6518 et seq.) of Chapter 65 of Title 3.2. If your animal becomes ill or injured while in the custody of the boarding establishment, the boarding establishment shall provide the animal with emergency veterinary treatment for the illness or injury.

The consumer shall bear the reasonable and necessary costs of emergency veterinary treatment for any illness or injury occurring while the animal is in the custody of the boarding establishment. The boarding establishment shall bear the expenses of veterinary treatment for any injury the animal sustains while at the boarding establishment if the injury resulted from the establishment's failure, whether accidental or intentional, to provide the care required by § 3.2-6503. Boarding establishments shall not be required to bear the cost of veterinary treatment for injuries resulting from the animal's self-mutilation.

Please retain this notice for your records. A copy is provided prior to delivery of your animal for boarding.

CLIENT ACKNOWLEDGMENT

I acknowledge that I have received and reviewed the Virginia consumer notice above before delivering my dog to Serenity Paws Lodge LLC.

Owner/Guardian Initials: _____

Date: _____

Serenity Paws Lodge LLC should also display the Virginia "PUBLIC NOTICE" at the facility intake area as required by Virginia law.

SERENITY PAWS LODGE LLC

CLIENT & PET REGISTRATION

OWNER / GUARDIAN INFORMATION

Full Name: _____
Address: _____
City / State / ZIP: _____
Phone: _____
Email: _____
Preferred Contact: ☐ Call ☐ Text ☐ Email _____

EMERGENCY CONTACT

Name: _____
Relationship: _____
Phone: _____
Alternate Phone: _____

PET #1 INFORMATION

Dog's Name: _____
Breed / Mix: _____
Date of Birth / Age: _____
Sex: ☐ Male ☐ Female Spayed/Neutered: ☐ Yes ☐ No _____
Weight: _____

PET #2 INFORMATION

Dog's Name: _____
Breed / Mix: _____
Date of Birth / Age: _____
Sex: ☐ Male ☐ Female Spayed/Neutered: ☐ Yes ☐ No _____
Weight: _____

PET #3 INFORMATION

Dog's Name: _____
Breed / Mix: _____
Date of Birth / Age: _____
Sex: ☐ Male ☐ Female Spayed/Neutered: ☐ Yes ☐ No _____
Weight: _____

VACCINATION & HEALTH RECORDS

☐ Rabies ☐ DHPP / Distemper ☐ Bordetella ☐ Other
Vaccination records provided: ☐ Yes ☐ No Expiration / Due dates attached: ☐ Yes ☐ No
Known allergies: _____
Medical conditions / diagnoses: _____
Previous surgeries, injuries, seizures, or other concerns: _____

SERENITY PAWS LODGE LLC
CARE, FEEDING & MEDICATION INSTRUCTIONS

BOARDING STAY

Drop-Off Date / Time: _____

Pick-Up Date / Time: _____

Authorized Pickup Person(s): _____

☐ Boarding ☐ Medication Administration ☐ Individual Play / Enrichment ☐ Extra Potty Breaks

FEEDING INSTRUCTIONS

Food Brand / Type: _____

Amount per Meal: _____

Frequency: _____

Usual Meal Times: _____

(Food must be supplied by the owner & individually wrapped for each meal.)

HAS YOUR DOG RELIEVED ITSELF TODAY? Urine: ☐ Y ☐ N BM: ☐ Y ☐ N

MEDICATIONS

Does your dog take medication? ☐ No ☐ Yes

Medication / Dose / Frequency: _____

Reason / Instructions: _____

Medication given today? ☐ Yes ☐ No Time / medication: _____

Please provide medications in their original labeled containers whenever possible.

BEHAVIOR & COMFORT

☐ House Trained ☐ Crate Trained ☐ Leash Trained ☐ Separation Anxiety

☐ Fearful / Anxious ☐ Resource Guarding ☐ Dog Reactive ☐ Escape Risk

Triggers / fears / situations to avoid: _____

What helps your dog feel safe and comfortable? _____

Has your dog ever bitten or injured a person or animal? ☐ No ☐ Yes _____

If yes, please explain: _____

SENIOR / SPECIAL-NEEDS CARE

☐ Senior ☐ Mobility Assistance ☐ Vision / Hearing Loss ☐ Incontinence

☐ Extra Rest ☐ Extra Potty Breaks ☐ Slow Walks ☐ Other

Special care instructions: _____

SERENITY PAWS LODGE LLC

EMERGENCY VETERINARY AUTHORIZATION

Serenity Paws Lodge LLC will make reasonable efforts to contact the owner or emergency contact if a dog becomes ill or injured. Virginia law requires a boarding establishment to provide emergency veterinary treatment when an animal becomes ill or injured while in its custody.

I authorize Serenity Paws Lodge LLC to seek veterinary care for my dog when reasonably necessary. I understand that, under Virginia law, I am responsible for the reasonable and necessary costs of emergency veterinary treatment for illness or injury occurring while my dog is in the facility's custody, subject to the circumstances described in the Virginia notice.

PREFERRED VETERINARY INFORMATION

Primary Veterinarian / Clinic: _____

Phone: _____

Preferred Emergency Hospital: _____

Phone: _____

Alternate Emergency Contact: _____

Phone: _____

EMERGENCY CONTACT AUTHORIZATION

☐ Authorize emergency veterinary care ☐ Attempt owner contact first when reasonably possible

If the owner cannot be reached promptly and emergency treatment is reasonably necessary, Serenity Paws Lodge LLC may transport or arrange transportation of the dog to an appropriate veterinary facility.

RESUSCITATION / CPR PREFERENCE

This section records the owner's preference for CPR in the event of cardiac or respiratory arrest. It does not limit routine care, monitoring, stabilization, or emergency veterinary treatment otherwise required or authorized.

☐ Attempt CPR / resuscitation ☐ Do Not Attempt CPR (DNR)

Owner understands that veterinary professionals determine the appropriate medical response and that CPR may be unsuccessful and may involve additional veterinary costs.

Owner/Guardian Initials: _____

Signature: _____

Date: _____

OWNER AUTHORIZATION

I certify that the information I have provided is accurate to the best of my knowledge and that I will notify Serenity Paws Lodge LLC of any material change in my dog's health, medications, behavior, or care needs.

Owner/Guardian Signature: _____

Printed Name: _____

Date: _____

SERENITY PAWS LODGE LLC

BOARDING ACKNOWLEDGMENT & PHOTOGRAPHY CONSENT

CLIENT ACKNOWLEDGMENT

I confirm that the information provided in this intake form is complete and accurate to the best of my knowledge. I agree to notify Serenity Paws Lodge LLC of changes to my dog's health, medications, behavior, vaccination status, or special care needs.

I understand that boarding involves ordinary risks associated with dogs, including illness, injury, stress, changes in behavior, interactions with people or animals, and damage to or loss of personal belongings. I agree to follow Serenity Paws Lodge LLC's current boarding policies, payment terms, cancellation policies, vaccination requirements, and safety procedures.

I understand that this form is intended to document care instructions and authorizations and does not waive any rights or protections that cannot legally be waived under Virginia law.

☐ I have received the current Serenity Paws Lodge LLC boarding policies

☐ I understand the emergency veterinary provisions

Owner/Guardian Signature: _____

Printed Name: _____

Date: _____

PERSONAL BELONGINGS

Please list items left with your dog. We recommend labeling all belongings. Serenity Paws Lodge LLC is not responsible for ordinary wear, damage, or loss of personal items except as otherwise required by applicable law or facility policy.

Item(s): _____

OPTIONAL PHOTOGRAPHY CONSENT

We love sharing happy moments from Serenity Paws Lodge! Photography consent is optional and is not required for boarding.

☐ YES — I give Serenity Paws Lodge LLC permission to photograph/video my dog and use the images for business promotion, including social media and the business website.

☐ NO — Please do not use my dog's image for promotional purposes.

Owner/Guardian Signature: _____

Printed Name: _____

Date: _____