

REGISTRATION FORM

OWNER INFORMATION										
Full Name:					ID. No.					
Email:					Mobile:					
Home Address										
Occupation										
Employer										
Work Address										
EMERGENCY (ALTERNATE) INFORMATION										
Full Name:										
Relationship:					Mobile:					
EMERGENCY DETAILS (VETERINARY)										
Vets Name:										
Contact:										
Clinic Address										
PET 1 DETAILS										
Pet's Name:				Pet's size			Behaviour:			
Pet's Age				S	M	L	O Jumps		O Nervous	
Pet's Breed				Male		Female		O Barker		O Spayed / neutered
Marks/colour							O Social		O Vaccinations up to date	
Microchipped	Y	N	Picture Attached			Y	N			
Medical Aid / insurance:										
Medical Aid / insurance No.										
*Pet Medical Aid / Insurance is highly recommended										
Vaccinations:	Date:				Product					
5 in 1 plus Rabies										
Kennel Cough										
Tick & Flea Control										
Deworming										
*Vaccination card to be attached to this registration form.										
Comments / Instructions:										
Daycare:	Y	N	Package Selected:			3 months	6 months	12 months		
Days/week	Monday		Tuesday	Wednesday		Thursday		Friday		
Boarding:	Y	N	Check-in:			Check-out:				
Grooming:	Y	N	Date:			Monthly		Y	N	

*Should the date fall on a weekend/public holiday, grooming will take place the day prior to the selected day									
* Invoices will be provided separately									
Grooming instructions:									
Collection / drop off required				Y		N			
PET 2 DETAILS									
Pet's Name:		Pet's size			Behaviour:				
Pet's Age		S	M		L	O Jumps		O Nervous	
Pet's Breed		Male		Female			O Barker		O Spayed / neutered
Marks/colour						O Social		O Vaccinations up to date	
Microchipped		Y	N	Picture Attached			Y	N	
Medical Aid / insurance:									
Medical Aid / insurance No.									
*Pet Medical Aid / Insurance is highly recommended									
Vaccinations:		Date:			Product				
5 in 1 plus Rabies									
Kennel Cough									
Tick & Flea Control									
Deworming									
*Vaccination card to be attached to this registration form.									
<u>Comments / Instructions:</u>									
Daycare:		Y	N	Package Selected:		3 months	6 months		12 months
Days/week		Monday		Tuesday	Wednesday	Thursday		Friday	
Boarding:		Y	N	Check-in:		Check-out:			
Grooming:		Y	N	Date:		Monthly		Y	N
*Should the date fall on a weekend/public holiday, grooming will take place the day prior to the selected day									
* Invoices will be provided separately									
Grooming instructions:									
Collection / drop off required				Y		N			

"CHECKLIST":

***ALL ITEMS TO BE CLEARLY MARKED WITH YOUR PETS NAME AND BREED**

- All items are brought to Sloppy Kisses at the owners' risk. (Items may be returned chewed/torn or completely damaged by your pet or another).
- All medications, in a "ziplock" bag/container – **clearly labelled and with written instructions**
- Enough dry and /or wet food for the duration of your pets stay plus 1 – 2 days – **clearly labelled in individually packed "ziplock" bags/containers with written instructions for feeding.**
- Blanket/basket should you wish to make them feel more at home – **clearly labelled.**
- Your pet needs to be fully vaccinated (Boosters, Rabies and kennel cough for dogs and Snuffles for cats) need to be up to date, at least 10days prior to arrival.
- Deworming, tick and flea prevention must be done 10 days prior to checking in.
- No unneutered/un-spayed or un-socialised pets may attend Sloppy Kisses. (No pets may attend in heat)
- **Pet insurance/medical aid is highly recommended.** Refer to our terms and conditions on www.sloppykisses.co.za
- Should your pet be afraid of lightning/thunder – please ensure that you pack the necessary calming Medication, such as Nutricalm. **Give clear WRITTEN instructions.**
- Declare all medical conditions, special needs, medications.
- Indicate should you require grooming before you collect, at an additional cost.
- Photographs are loaded to social media in the evening, and no photographs will be sent to individual clients via WhatsApp or email.
- Please attach a photograph of your pet.
- Prices as set out on our website www.sloppykisses.co.za
- Compulsory trial day for ALL dogs not in our doggy daycare.

Operating times:

Daycare operating hours	Hotel collection & drop off times
Monday to Friday 06h30 – 18h00	Monday – Sunday 9am -9:30am *For an additional fee, your pet can "stay and play" with collection between 4pm – 4:30pm
Weekends/Public holidays by appointment only	

The owner expressly acknowledges that Sloppy Kisses shall not, in any manner whatsoever and in so far as the law allows, be liable for any loss, injury and/or damages howsoever sustained by any other animal and/or owner and/or their property arising from any cause whatsoever, including, but not limited to, and negligent act or omission, of Sloppy Kisses.

Owners are requested to examine and satisfy themselves as to the conditions of the accommodation for the intended boarding and on the signing hereof agree that they are satisfied with such conditions.

- **I have read and accept all the terms and conditions as stipulated on the Sloppy Kisses website. www.sloppykisses.co.za**

Owner Signature: _____ Date: _____

Please deposit the amount quoted to the following account prior to arrival:

Sloppy Kisses

FNB Current Account

Sloppy Kisses

Account: 62781711380

Branch Code: 256755

Reference: PLEASE USE THE INVOICE NUMBER

Consent to Process Personal Information
Applicable to all personal information as defined in
the Protection of Personal Information Act, 4 of 2013 ("POPIA")

I _____ (full name), unconditionally and voluntarily consents to Sloppy Kisses (Pty) Ltd collecting, holding, organising, storing, using, processing and administering my personal information for the purposes of business relations and/or dealings and/or for purposes as set out in this Agreement and/or by operation of law.

I confirm that the personal information (as defined in POPIA) may be used for the administration and enforcement of business relations and/or dealings and for purposes as set out in this Agreement, as well as by operation of law, and I further accept that this may involve the information being sent to a country outside the Republic of South Africa (in which the Company may or may not provide services) given that Sloppy Kisses (Pty) Ltd has affiliates / associated companies / business dealings outside the Republic of South Africa.

I acknowledge that I have the right to request a list of the names and addresses of any potential recipients of the information and to review and correct the information if I so wish.

I acknowledge that the collection, processing and/or transfer of the Information is important to enforce the contractual relationship / dealings with Sloppy Kisses (Pty) Ltd and that failure to consent to same may result in the cancellation of business relations and/or dealings.

Sloppy Kisses (Pty) Ltd commits to notifying me immediately in the event that it comes to their attention that any information of mine has been accessed by any unauthorised person. Sloppy Kisses (Pty) Ltd commits to ensuring that all Personal Information is held securely and safeguarded and whenever I require other organisations to provide services to me, I will bind these service providers to its privacy policy as far as they may be required inter alia to access to their customers' and/or service providers' personal information and to perform any such services and/or by operation of law.

Should you not agree to any of the above conditions you are required to notify Sloppy Kisses (Pty) Ltd immediately at janine@sloppykisses.co.za. Should Sloppy Kisses (Pty) Ltd not hear from you it will be taken as consent to the above.

Signed at _____ on this the _____ day of _____ 2021.

Signature: _____
Name: