

DAYCARE 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	<input type="checkbox"/> Jumps	<input type="checkbox"/> Nervous
Pet's Breed		Male	Female		<input type="checkbox"/> Barker	<input type="checkbox"/> Spayed / neutered
Marks/colour					<input type="checkbox"/> Social	<input type="checkbox"/> 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 but not compulsory						
Vaccinations:	Date:	Product				
Vanguard 5 in 1 plus Rabies - Annually						
Bordetella (Kennel Cough) - Annually						
Nexgard Spectra / Revolution - Monthly						
*Vaccination card to be attached to this registration form.						
Deworming, tick & flea treatments are to be kept up to date at all times.						
Comments / Instructions:						

PET 2 DETAILS						
Pet's Name:		Pet's size			Behaviour:	
Pet's Age		S	M	L	<input type="checkbox"/> Jumps	<input type="checkbox"/> Nervous
Pet's Breed		Male		Female	<input type="checkbox"/> Barker	<input type="checkbox"/> Spayed / neutered
Marks/colour					<input type="checkbox"/> Social	<input type="checkbox"/> Vaccinations up to date
Microchipped	<input type="checkbox"/> Y	<input type="checkbox"/> N	Picture Attached		<input type="checkbox"/> Y	<input type="checkbox"/> N
Medical Aid / insurance:						
Medical Aid / insurance No.						
*Pet Medical Aid / Insurance is highly recommended but not compulsory						
Vaccinations:	Date:			Product		
Vanguard 5 in 1 plus Rabies - Annually						
Bordetella (Kennel Cough) - Annually						
Nexgard Spectra / Revolution - Monthly						
*Vaccination card to be attached to this registration form.						
Deworming, tick & flea treatments are to be kept up to date at all times.						
<u>Comments / Instructions:</u>						
Contract start date:						
Daycare:	Package selected		<input type="checkbox"/> 1 Month		<input type="checkbox"/> Seamless	
Days/week	Monday	Tuesday	Wednesday	Thursday	Friday	
<p>*Please ensure that you keep to the day(s) selected above. Should there be a public holiday on the day selected, you have 30days in which to catch up the missed day. (Please whatsapp/email the office to book the catch-up day in advance). If you do not bring your pet in on the chosen day, you will forfeit the day.</p>						
						Sign: _____

Daycare operating hours

Monday to Friday	07h00 – 17h30
<p>Closed weekends & public holidays.</p> <p>Any dogs not collected on time, will be booked into the hotel and charged for accommodation and a full bag of food.</p> <p><u>*We allow for the odd early morning drop off from 6:30am Monday to Friday, for daycare by arrangement.</u></p> <p><u>*We allow for the odd emergency late collection up to 18h00 Monday to Friday, for daycare by arrangement.</u></p> <p style="text-align: right;">Sign: _____</p>	

"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 lunches/medications, in a "ziplock" bag/container – clearly labelled and with written instructions (We do not administer injections)
- Your pet needs to be fully vaccinated (Boosters, Rabies and kennel cough) – 10 days prior to commencing at Sloppy Kisses.
- Deworming, tick and flea prevention must be done 10 days prior to commencing at Sloppy Kisses and repeated monthly/every 3 months – as per the product they are on.
- No unneutered/un-spayed or un-socialised pets may attend Sloppy Kisses, unless under 1 years old. (No pets may attend in heat)
- Pet insurance/medical aid is highly recommended, but not compulsory. 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.

- 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 already in our doggy daycare.

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 daycare for the intended use 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 and will view the website for regular updates of the terms and conditions.
- No amendments or alterations to the contact are accepted.

**Please deposit the daycare amount monthly into the following account:
*Invoices are sent out monthly on the 20th, for payment by no later than the last working day of the month. (Payment is due in advance for the following month)**

Sloppy Kisses

FNB Current Account

Sloppy Kisses

Account: 62781711380

Branch Code: 256755

Reference: PLEASE USE THE INVOICE NUMBER

December invoices will be sent out before the 20th, due for payment by 30 December.

Owner Signature: _____

Date: _____

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 _____ 20_____.

Signature: _____

Name: _____