



Emergency Contact Form

In case of an illness or emergency when you are away, Downtown Dogs requires that you have at least two local emergency contacts if you will not be local. These emergency contacts are authorized to pick up your dog and care for him if needed. You will be asked to update this form every time your dog stays with us.

Name: _____

Dog's Name: _____

Phone number where you can be reached: _____

Emergency Contact #1

Name: _____

Phone: _____

Alternate Phone: _____

Emergency Contact #2

Name: _____

Phone: _____

Alternate Phone: _____

If Downtown Dogs cannot reach me and my dog requires veterinary attention, I authorize DT Dogs LLC, its agents or employees to transport my dog to a veterinary hospital. I authorize a licensed veterinarian to administer treatments and/or perform procedures that are considered necessary. However, the cost of such services shall not exceed \$_____. Further, I agree to assume full financial responsibility up to the amount I have specified and a transportation fee of \$25 will be applied.

Signature

Date