



OWNER INFORMATION

Pet Owner(s): _____

Address: _____

Phone1: _____ Phone2: _____

Email(s): _____

Emergency Contact: _____

Phone1: _____ Phone2: _____

AUTHORIZED RELEASE OF PET(S) TO SOMEONE OTHER THAN OWNER

By completing the below information, you are authorizing that someone other than the above stated Owner(s) is authorized to pick up your pet(s). By authorizing this, Owner(s) releases The Madisson Inn from any and all responsibility and liability for releasing said pet(s) to the authorized person. The Madisson Inn reserves the right to ask for photo IDs when Authorized persons pick-up pet(s).

Authorized person(s): _____

Phone1: _____ Phone2: _____

** This form, as well as the Pet Information form(s), is to be made a part of The Madisson Inn's Boarding Contract. Pet Information form(s) to be completed separately.

Owner signature: _____ Date: _____

Owner signature: _____ Date: _____