

CANINE FUNTIME, LLC

Daycare Application

Name:	D.O.B.
Address:	City:
State:	Zip:
Home Telephone #:	Business Telephone #:
Social Security #:	Email:
Employer:	
Business Address:	City:
State:	Zip:

BILLING PROCEDURE

UPON RECEIPT OF THIS APPLICATION BY CANINE FUNTIME, LLC, I (WE) HEREBY AGREE TO AND ACCEPT THE TERMS AND CONDITIONS OF CANINE FUNTIME DOG DAYCARE .

NOTE: A \$10.00 fee will be applied for each 15 minutes tardy in picking up your canine
A service charge of \$10.00 will be applied to all past due accounts.
In the event of dog daycare suspension, there will be no refund of prepaid fees.

Automatic Billing to Credit Card #:	Exp Date:
Amex Visa MasterCard Paypal	Cvc Code:
Member Signature:	Email:
Canine Funtime, LLC Signature:	
Referral Source:	