

**Stellar Retrievers, LLC**

2326 Muleshoe Dr  
Conroe, TX 77384  
979-716-9465

Owner's Name: \_\_\_\_\_

Street Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Animal's Call Name: \_\_\_\_\_

Animal's Registered Name:

\_\_\_\_\_

Breed: \_\_\_\_\_ Sex M / F: \_\_\_\_\_ Color \_\_\_\_\_

DOB: \_\_\_\_\_

Registration Number: \_\_\_\_\_

Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

Type of Heart Worm Medication: \_\_\_\_\_

Next Heart Worm Due: \_\_\_\_\_ Supplier: \_\_\_\_\_

Type of Food and Schedule: \_\_\_\_\_

Are All Vaccinations Current? \_\_\_\_\_ Rabies? \_\_\_\_\_ Kennel Cough? \_\_\_\_\_

List Your Expectations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For each month that the above animal is kept at Stellar Retrievers Kennel, I agree to pay \$690.00 per month, plus live birds to Stellar Retrievers, LLC as a boarding and training fee. Partial months will be prorated and payment is due prior to the first of each month. Late Payment will be subject to a \$100.00 Late Fee and the Animal(s) Will Not Be Trained Until Payment Is Received. Failure to pay for two months will result in the sale of the animal for fees due. In case of emergency, the animal will be taken to Giddings Veterinary Hospital or a facility closest to where we are training at the time and all charges will be the responsibility of the Owner. The Owner will be notified immediately in case of such emergency. I hereby waive and release any and all claims and hold harmless Stellar Retrievers Kennel, Jack Morris, and his family and any other persons connected with Stellar Retrievers, LLC or anyone claiming by or through me; now has or may hereafter acquire for damages, accidental injury, accidental loss or death resulting from or arising out of boarding or training at Stellar Retrievers Kennel. Any dog that bites while at the Kennel shall be removed immediately and neither Stellar Retrievers Kennel nor its employees will be held responsible for actions that occur during the bite incident.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

**Mail to: Stellar Retrievers, LLC 2326 Muleshoe Dr. Conroe, TX 77384 or  
E-Mail to [stellarretrievers@consolidated.net](mailto:stellarretrievers@consolidated.net)**