

Boarding and Daycare Agreement

I, _____, agree to the following terms and conditions relating to dog daycare and boarding of one or more of my dogs at DOG PAD INC (Hereby referred to as DOG PAD). If it should become necessary for my dog(s) _____ to receive medical treatment, I hereby give my permission for a licensed veterinarian to administer the medical treatment deemed necessary, including anesthesia. I understand every effort will be made to contact me in such an event. I understand I am fully financially responsible for any and all costs resulting from veterinarian care. In case of emergencies, DOG PAD will take my dog(s) to my veterinarian, or if unavailable, an emergency veterinary service for any treatments deemed necessary.

I agree not to file legal charges against DOG PAD, the staff or owner for any injury, death or loss of dog. I hereby release DOG PAD, its staff or owner from all liability for any injury, death or loss of my dog while in the custody of, or on the grounds surrounding DOG PAD facilities.

If my dog(s) attends daycare and boarding, I understand that the dog(s) may be corrected verbally, put a bark collar on, possibly wear and E-collar, restricted from other dogs or put on a leash for misbehaviors such as aggressive barking, over arousal or growling and snapping at other dogs or people. I understand the concept of dog day care is to socialize dogs by allowing them to interact with other dogs and people. All reasonable precautions are taken to safeguard the health and physical well being of the dogs staying at DOG PAD for boarding and day care. I understand that the fence around DOG PAD is 6 feet tall and certain dogs can jump over or climb over a fence of this type. I understand that there are certain risks inherent in leaving my dog (s) in the custody of DOG PAD and that with the interaction of dogs there is a chance of injury.

I Agree _____(Initials) AUTHORIZATION OF MEDICAL CARE:

If my dog is ill or injured while participating in activities at DOG PAD, DOG PAD will make every reasonable effort to reach me pursuant to the contact information I have provided DOG PAD. However, if DOG PAD is unable to reach me, I consent to DOG PAD seeking appropriate veterinary care and I accept responsibility for any and all associated expenses. DOG PAD will not pay any portion of veterinary expenses associated with seeking medical care for my dog if so necessary.

I Agree _____(Initials) ALLERGIES, SPECIAL DIETS, MEDICATIONS:

I agree that I will disclose to DOG PAD any allergies my dog may have. I further agree to disclose to DOG PAD any special dietary needs or medications my dog may require if necessary during activities at DOG PAD.

I Agree _____(Initials) PHOTOGRAPHS AND STATEMENTS:

I authorize use of my dog's visual image(s) and statements in newsletters, posters, and other electronic media such as DOG PAD website and face book pages

I Agree _____(Initials) VICIOUS TENDENCIES:

I affirm that I am not aware of any vicious tendencies by my Dog.

I Agree _____(Initials) AGREEMENT TO PAY:

DOG PAD accepts checks or cash only. I agree to pay the service rates in effect for my dog's participation in activities at DOG PAD. I further agree to pay for any additional services requested such as grooming, drop-off, and/or pick-up service. All services must be paid in full at the time you pick up your dog(s).

I Agree _____(Initials) DAMAGE:

I accept the responsibility of paying for any damage to facility, property, and/or equipment caused by Dog(s).

I Agree _____(Initials) VETERINARY RECORDS:

My dog's complete veterinary records must be furnished to DOG PAD. These records must include proof of vaccinations and/or treatment for: parvovirus, distemper, Bordatella, heartworm, fleas, and ticks. Records may be sent via email to Tory@Dogpaddogs.com. I further attest that my dog is free of parasites and other illnesses that can be transmitted from dog-to-dog. Due to the high risk of dog-to-dog transmission of such parasites and/or viruses, I agree that I will immediately notify DOG PAD if I learn or suspect my dog has parasites or viruses and agree to not bring my dog to DOG PAD for any activities until I receive clearance from DOG PAD, in conjunction with my dog's veterinarian.

I Agree _____(Initials) EVALUATION OF DOG PRIOR TO PARTICIPATION:

Every dog must be evaluated by DOG PAD prior to participating in any activity. Such evaluation may assess the dog's temperament and interactions with other dogs and DOG PAD staff.

I hereby expressly and forever generally waive, discharge claims, indemnify, release from liability, save, hold harmless and defend and covenant not to sue DOG PAD INC, and their invitees, owners, directors, employees, volunteers, agents and any parties owning, controlling or having any interest in the property at which training, boarding, or day care is taking place, and all other representatives or agents (the "Releasees") from and against any and all injury, liability, claims, litigation, actions, suits, costs, losses, damages, expenses or demands (including reasonable attorney's fees) of every character whatsoever on account of, arising out of, resulting from or relating in any way to (i) any act or omission of the Releasees, including negligence, and (ii) my or my dog's participation in activities at DOG PAD INC, or otherwise. I further agree to defend, indemnify, save and hold harmless the Releasees from any claims, litigation, actions, suits, damages, costs, attorney's fees, losses or injuries as the result of any such claim. I agree that this release shall be binding on me and my successors, heirs, legal representatives, and assigns. I also expressly and forever release DOG PAD INC from any duty to protect me or my dog(s) from injury of any kind, and agree that even if DOG PAD INC chooses to implement safety precautions, such actions shall not alter the fact that I have released DOG PAD INC from any duty to protect me or my dog(s).

I have read and fully understand the terms of this "Boarding and day care agreement, release, waiver of liability, assumption of risk and indemnify agreement" (the "Agreement") and understand that I have given up substantial rights by signing it and have signed it freely and voluntarily without any inducement, assurance or guarantee and intend it to be a complete and unconditional release of all liability to the greatest extent permitted by law and agree that if any portion of this agreement is held to be invalid or unenforceable, that the remainder of this agreement shall remain in full force and effect. I agree that it is intended that all terms of this agreement control despite any particular statute or law that would otherwise protect me or my dog(s).

I hereby represent that I assume all financial liability for the actions of my dog(s) and agree to maintain personal liability insurance or financial resources adequate to pay for any injury or damage which could be caused by my dog(s) while in the care and custody of DOG PAD INC. By signing this agreement I permit DOG PAD INC, its staff and owner to accept reservations for future services without additional contracts or written authorization.

Dog(s) Owner Signature _____

Date _____

DOG PAD INC _____

Date _____