



New Pet Application

Owner's Name _____ E-Mail _____
 Address _____ City _____ State _____ Zip Code _____
 Home # _____ Cell # _____ Work # _____
 Pet's Name _____ Birth Date ___/___/___ Sex _____
 Breed _____ Color _____ Weight _____
 Is your pet spayed or neutered? _____ **All dogs are required to be spayed/neutered after 6 months of age.*

Primary Veterinary Hospital _____ Phone _____
 Address _____ City _____ State _____ Zip Code _____
**Required vaccinations are: CANINE: Rabies, Distemper and Bordetella FELINE: Rabies & FVRCP*

Emergency Contact Name _____ Phone # _____
 Person(s) authorized to pick up your pet _____

ABOUT MY PET

1. Have you brought your pet to a daycare/overnight facility before? _____
2. Is there any kind of situation that your pet is uncomfortable with? _____
3. Has your pet shown any signs of aggression towards another person or pet? _____
4. Are there any specific areas on your pet's body where he/she doesn't like to be touched? _____
5. Are there any restrictions on your pet's activity we should be aware of? _____
6. Does your pet have any allergies/health conditions? _____

CANINE QUESTIONS (#8-9)

7. Has your dog ever jumped a fence, wall, gate, etc? _____
8. Has your dog played with a dog over 20lbs? _____ Under 20lbs? _____
9. Is there any breed that your dog is uncomfortable around? _____

Meals & Medications: Because this type of information is always changing, please provide feeding and medication instructions when you drop off for daycare or boarding!

HOW DID YOU HEAR ABOUT US? _____

I, the undersigned, acknowledge and agree that all the information provided in this Pet Application is complete and accurate to the best of my knowledge. I further acknowledge and agree that I have read, understand and agree to all terms and conditions contained in the Waiver of Liability and Assumption of Risk & Indemnification Agreement (SEE BACK), as they may be amended from time to time, which are attached and fully incorporated into this application by reference. I hereby execute the Agreement for my dog, cat, myself and my heirs, successors, representatives and assigns. I further attest that if I am not the sole owner or representative of the dog or cat subject to this application, that my signature is sufficient to enter into this Agreement for and on behalf of any other owner or representative.

Owner's Signature _____ Printed Name _____ Date _____



WAIVER OF LIABILITY AND ASSUMPTION OF RISK & INDEMNIFICATION AGREEMENT

READ CAREFULLY. THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE TAIL WAGGERZ DOG DAYCARE, LLC AND RELATED PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT.

As a condition of using our services for your pets, the following Waiver of Liability & Assumption of Risk & Indemnification Agreement must be signed (SIGNATURE ON PAGE ONE): By choosing to utilize the services, groom or board my pet(s) at Tail Waggerz Dog Daycare, LLC, I agree to the following:

- I agree to pay the rates that are in effect at the time my pet is at Tail Waggerz Dog Daycare, LLC. I am aware that extra charges may be incurred and I agree to pay them at the time of pick-up. Examples include, but are not limited to: Daycare, boarding, grooming and training.
- I understand that on entering Tail Waggerz Dog Daycare, LLC my pet will be examined for fleas. If fleas are found, a natural flea repellent bath or an oral flea treatment caplet will be administered at my expense.
- My dog will be participating in an interactive play setting during their stay at Tail Waggerz Dog Daycare, LLC. I understand that an interactive play setting is not without some risk of injury, that despite all the dogs appearing healthy and being handled with the greatest amount of care and foresight, dogs are not always predictable and the unexpected may occur. I recognize that the benefits of an interactive playgroup are valuable to my dog, and accept the potential risks. I further agree to pay veterinary/medical expenses incurred as a result of injury to or caused by my dog.
- I understand and accept that during non-operating hours, my pet may be left unattended in their designated kennel or enclosure. (6:00pm/7:00pm to 6:50pm/7:50am).
- I acknowledge that Tail Waggerz does not have a sprinkler system installed on the premises.
- I understand and accept that there are inherent risks associated with leaving my pet unattended during non-operating hours and the absence of a sprinkler system, including but not limited to fire, theft, vandalism, or natural disasters. I voluntarily assume these risks on behalf of my pet.
- I have provided accurate and up-to-date emergency contact information for myself, including phone numbers and an alternative emergency contact person who can make decisions on behalf of my pet in case of an emergency.
- If my pet appears to be ill, I authorize Tail Waggerz Dog Daycare, LLC to engage the services of a veterinarian at my expense, to give other requisite attention, and to make whatever decisions are required for my pet's veterinary treatment. I agree to pay all veterinary charges incurred by my pet while in the care of Tail Waggerz Dog Daycare, LLC. I will not hold Tail Waggerz Dog Daycare, LLC liable for failure to seek veterinary attention or for decisions made under this contract.
- I understand that Tail Waggerz Dog Daycare, LLC will exercise all due diligence and care in the guardianship of my pet. I hereby waive and release Tail Waggerz Dog Daycare, LLC, its employees, owners and agents from any and all liability of any nature, for injury or damage, including that which may result from the action of any dog including my own, and I expressly assume the risk of such damages, injuries, or losses while my pet participates in or attends any function of Tail Waggerz Dog Daycare, LLC, while on the grounds or the surrounding area thereto, including those arising from the absence of a sprinkler system..
- Tail Waggerz Dog Daycare, LLC will automatically extend your stay for up to five nights beyond my scheduled stay without notification. I understand that after these five nights, I must contact Tail Waggerz Dog Daycare, LLC with a new scheduled pick up date. Failure to do so will be considered abandonment of my pet and Animal Control will be notified.

On behalf of myself and any and all other owners of this pet, I have read and agreed to the terms of this contract. I warrant that I have the authority to represent any and all other owners of this pet in signing this contract.