

## RULES & REQUIREMENTS



**To ensure the health and safety of your pet and of our other guests, we require that all of our clients comply with the following rules and requirements:**

1. All dogs must successfully complete a full temperament assessment with the clinic's certified trainer prior to attending doggie daycare. I (the owner) understand that if my dog(s) has a history of aggression or biting, Compassionate Care Veterinary Clinic reserves the right to refuse service. I have disclosed to Compassionate Care Veterinary Clinic all known dangers associated with my dog(s).
2. All dogs must be at least 3 months of age or older. All dogs over the age of 7 months must be spayed or neutered. Puppies and shelter dogs must be in the home for 2 weeks prior to coming to the daycare.
3. All dogs must have up-to-date vaccinations. Owners must submit proof that their dogs have current DHLPP (distemper), rabies and bordetella (kennel cough) vaccinations, as well as a current fecal test.
4. All dogs must be in good health. Owners will certify that their dog(s) are in good health and have not been ill with a communicable condition in the last 30 days. Upon admission, all dogs must be free from any condition that could potentially jeopardize other guests, including fleas or ticks. Dogs that have been ill with a communicable condition within the last 30 days will require veterinary certification of health to be admitted or readmitted.
5. All dogs must have a complete, up-to-date and approved application on file prior to attending daycare.
6. Please, do not bring personal items like bones or toys for daycare. We have all the food/water bowls, bedding, measuring cups, treats, and toys necessary for your dog's care.
7. If a pet that is presented for daycare is found to have fleas and/or ticks, it will be bathed and medically treated at the owner's expense.
8. If any medical problems develop while my dog(s) is in the care of Compassionate Care Veterinary Clinic, I authorize the clinic doctors to do whatever they deem necessary for the safety, health and well being of my dog(s). Furthermore, I agree to assume full responsibility for any and all expenses incurred. I understand that all medical or grooming services are charged separately from doggie daycare fees.

**Name of dog(s):** \_\_\_\_\_

I, \_\_\_\_\_ (print name) certify that I have read and understand the rules and regulations and accept all the terms and conditions and statements of this agreement.

**Signature of owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# HOLD HARMLESS AGREEMENT

***As a condition of using our services for your pets, the following Waiver & Assumption to Hold Harmless must be signed:***

**By choosing to utilize the services, participate in the activities, and groom or board my pet(s) at Compassionate Care Veterinary Clinic Doggie Daycare, I agree to the following:**

I agree to pay the rates that are in effect at the time my pet is at the Ruff House Doggie Daycare. 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 the following: grooming, medical services, and emergency treatment.

I understand that an interactive play setting is not without some risk of injury. I understand that despite all of the daycare participants being temperament-tested prior to entering doggie daycare, 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 invaluable 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(s).

If my pet appears to be ill, I authorize Compassionate Care Veterinary Clinic to engage the services of the doctor at my expense, to give other requisite attention, and to make whatever decisions are required for my pet's treatment. I agree to pay all veterinary charges incurred by my pet. I understand that all attempts will be made to contact me regarding my pet. In the event I cannot be reached, I will not hold Compassionate Care Veterinary Clinic liable for failure to seek services or decisions made under this contract.

I understand that Compassionate Care Veterinary Clinic will exercise all due diligence and care in the guardianship of my pet during my absence. I hereby waive and release Compassionate Care Veterinary Clinic, its employees, owners, and agents from any and all liability of any nature, for injury and damage, including that which may result from the action of any dog including my own. Furthermore, I expressly assume the risk of such damage or injury while my dog participates in or attends any function of Compassionate Care Veterinary Clinic doggie daycare, while on the grounds or the surrounding area thereto.

I understand that I am required to provide Compassionate Care Veterinary Clinic documented vaccination records and to keep the vaccination up-to-date for the duration of my dog's participation at doggie daycare.

I agree to abide by the clinic's vaccinations and health requirements. This includes maintaining current Rabies, Distemper, Bordetella vaccinations and a current fecal test.

On behalf of myself and any and all other owners of this pet, I have read and agree 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 the contract.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_