



DOG DAY CARE AGREEMENT AND WAIVER

*Please initial that you have read and understand each point - please ask for clarification if necessary

1. I represent that my dog is in good health, is current on all required vaccinations (DHLPP, Rabies and Bordetella), is current on Flea/Tick Preventative Medication and has not been ill with any contagious viruses in the last 30 days. initial
2. I understand that while my dog is fully vaccinated that vaccines are not 100% fool proof, and there is still a risk (albeit minimal) that my dog may contract a contagious virus/disease. I agree that should this occur I am responsible for my own pets care and medical attention. initial
3. I agree to allow 7 days waiting period after my dog has had his/her vaccinations to allow the vaccines to reach full potential and to ensure my dog has not had any negative reaction to the vaccines. Should I allow my dog to stay at NO BONES ABOUT IT in a shorter than 7 day wait period, I understand that my dog could be at risk of contracting a contagious virus/disease. initial
4. I represent that my dog will be evaluated and deemed suitable for daycare/boarding. initial
5. I represent that my dog is sociable and has not harmed or shown threatening behaviour towards any person or other dog. I understand that should my dog display any unwanted behaviour while in the care of NO BONES ABOUT IT that staff will remove him/her from the play area. initial
6. I understand that although all dogs are fully supervised that incidents of injury may occur. This includes that my dog could receive bites, scrapes, and scratches from his/her playmates. initial
7. I allow the NO BONES ABOUT IT staff to contact my/a veterinarian as deemed necessary, should any injuries require medical attention. I agree that I am responsible for any medical bills acquired by my own pet. initial
8. I release NO BONES ABOUT IT from any liability should my dog injure another dog or person and accept medical and legal responsibility for my pets' actions. initial
9. I have read and understood the daycare/boarding policies found on the Pre-assessment Process document. initial

With my signature below I certify that I have read and understand the agreement and waivers. I agree to abide by the regulations and accept all terms and conditions as set out.

Date:

Signature:

Note: Please print and sign

Print Name:

Phone #

e-mail :