

KENWOOD CANINE CLUBHOUSE
Doggy Daycare- Owner Agreement

Client Name _____

Client Address _____

Primary Phone # _____

Pet Name _____

Pet Breed _____

Pet Age _____

I understand and agree that in admitting my dog(s), Kenwood Canine Clubhouse has relied on my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or any other dog. However, as this is a cage-free, play-group environment, that there are inherent risks to my dog(s) and I accept these risks.

I understand that I am solely responsible for any harm caused by my dog(s) while dog(s) is/are attending daycare at Kenwood Canine Clubhouse. While my dog is in the care and custody of Kenwood Canine Clubhouse and I am unreachable in the event of an emergency, I hereby authorize Kenwood Canine Clubhouse, its agents, and/or representatives to seek immediate veterinary care for my dog at Kenwood Animal Hospital or, at their discretion, an emergency facility. I understand that all costs in connection therewith, including transportation, and veterinary medical, transportation and otherwise, shall be my responsibility and I am herewith providing Kenwood Canine Clubhouse with credit card information to be used for such purposes.

I understand that if I do not pick up my dog(s) at the close of business hours, I will be charged \$27/15 minutes per dog. At 30 minutes past closing, Kenwood Canine Clubhouse will transfer my dog(s) to Kenwood Animal Hospital for boarding at the rate applicable to my size dog(s), and I will be unable to pick up my dog(s) until the following business day when Kenwood Animal Hospital re-opens.

I further release and discharge Kenwood Canine Clubhouse, Kenwood Animal Hospital and its employees from any liability, claims and damages in connection therewith.

Although we carefully screen all applicants, occasionally we discover that this is not an appropriate environment for every dog. Kenwood Canine Clubhouse reserves the right to permanently remove a dog from daycare at any time.

I certify that I have read and understand this agreement. I agree to abide by the rules and regulations and accept all the terms, conditions, and statements of this agreement.

Signature of Owner

Date

Contact Numbers: _____

Veterinarian/Clinic

Vet. Phone#

