



Dog Daycare and Boarding Service Contract

THIS AGREEMENT is entered into by and between Splash Premier Pet Resort (hereafter referred to as Splash) and _____ (owner):

1. Owner understands and agrees that Owner is solely responsible for any harm caused by Owner's dog(s) while Owner's dog(s) is/are attending Splash. _____ (initials)
2. Owner understands and agrees that during normal dog play, Owner's dog(s) may sustain injuries. All dog play is carefully monitored by Splash to avoid injury, but scratches, punctures, torn ligaments, etc., may occur despite supervision. _____ (initials)
3. Owner understands and agrees, in admitting Owner's dog(s) to Splash, that Splash has relied upon Owner's representation that Owner's dog(s) is/are in good health and has/have not harmed, shown aggression, or exhibited any threatening behavior toward any other dog or person _____ (initials)
4. Owner understands and agrees that neither Splash nor any of its employees will be liable for any injury, illness, death, and/or escape of Owner's dog(s) provided that reasonable care and precautions are followed, and the Owner hereby releases Splash and all employees of any liability of any kind whatsoever arising from or as a result of Owner's dog(s) attending or participating at Splash. _____ (initials)
5. Owner hereby authorizes Splash to arrange emergency veterinary care, releasing Splash from all liabilities relating to transportation, treatment, and expense. Owner authorizes Splash to approve medical/emergency treatment as recommended by a veterinarian. Owner agrees to reimburse Splash for any expenses incurred. _____ (initials)
6. Owner understands and agrees that any behavioral or health problems that develop with the Owner's dog(s) while at Splash will be handled and treated as deemed best by the employees of Splash, at their sole discretion, and Owner expressly agrees to assume full financial responsibility for any and all expenses arising or relating hereto. This includes aggressive or destructive behavior. _____ (initials)
7. Owner understands and agrees that Owner's dog(s) will at all times while attending Splash have current vaccination/immunization status. Owner further understands that even vaccinated animals can contract Bordetella (Kennel Cough) and that Owner will not hold Splash responsible if Owner's pet(s) contracts Bordetella. _____ (initials)

8. Owner understands and agrees to comply with federal and state Animal Abandonment rules.

_____ (initials)

9. Owner understands and expressly agrees that each and every foregoing provision contained in Paragraphs 1-8 above shall be in force and effect and shall apply to each and every occasion that Owner boards or deposits Owner's dog(s) with Splash for daycare, extended boarding, grooming or training, and that this agreement shall remain in full force and effect as between the parties until and unless otherwise cancelled or updated in writing and signed by both parties.

_____ (initials)

Owner hereby certifies that Owner has read and understands these rules as set forth above, and that Owner has read and understands this Agreement, and each of its terms and conditions, and agrees to abide and be bound by these rules and regulations.

Owner signature _____ Date _____

Print Owner Name _____

Name(s) of Dog(s) _____

LIABILITY RELEASE and CREDIT CARD AUTHORIZATION

Thank you for choosing Splash Premier Pet Resort and for entrusting us with the care of your dog. Your dog's health and well-being is important to us. Every effort will be taken by Splash Premier's management and staff to provide a happy and healthy experience for your dog.

Occasionally, even healthy dogs can contract an illness when in a cage-free play environment. While we require that all dogs be vaccinated and appear healthy, our guests can sometimes experience problems. In the rare event that your pet shows symptoms of illness, we will seek immediate intervention and/or treatment; however, under no circumstances will Splash Premier assume responsibility for expenses related to your pet either while staying with us or upon return to home.

Since Splash Premier is a cage free facility, dogs spend the day playing together. Arguments may occur between some dogs, although rarely does it escalate or cause injury. Our staff is trained to intervene as quickly as possible, however, should veterinary care be necessary, you are responsible for all expenses related to your dog regardless of which dog was at fault.

In signing this release, you or the authorized signer on this credit card accept responsibility for your own pet's expenses should any injury or illnesses occur. Your signature will also serve as authorization for Splash Premier to use your credit card for any deposits, services, and/or medical/veterinary needs in your absence.

Credit Card: _____ - _____ - _____ - _____ Visa Mastercard American Express Discover

exp: ___/___ security code (on back): _____

Name as it appears on card:

Signature:

Date: _____

Please print name of your dog(s): _____

PET PROFILE

How did you hear about us? Google _____ Instagram _____ Yelp _____ Other _____

OWNER INFO

FULL NAME(S) _____ EMAIL ADDRESS _____

ADDRESS _____ CELL PHONE # _____

EMERGENCY CONTACT NAME _____ PHONE # _____ ALTERNATE PHONE # _____

VET NAME and PHONE # _____

PET INFORMATION: NAME _____

M__ F__ NEUTERED/SPAYED? _____ DOB _____ BREED _____

PLEASE DESCRIBE ANY BEHAVIORS WE SHOULD BE AWARE OF IN ORDER TO PROVIDE OPTIMAL CARE AND SAFETY FOR YOUR DOG _____

FEEDING: WHAT BRAND OF FOOD DO YOU FEED? _____

FEEDING SCHEDULE: _____

MEDICAL HISTORY

PLEASE LIST ANY PREVIOUS MEDICAL PROBLEMS OR ALLERGIES:

(FOR EX: PRONE TO HOTSPOTS, EAR OR EYE INFECTIONS, ARTHRITIS, PRIOR SURGERIES, ETC.)

WEIGHT _____ COLOR _____

MEDICATIONS/SUPPLEMENTS: _____

PET INFORMATION: NAME _____

M__ F__ NEUTERED/SPAYED? _____ DOB _____ BREED _____

PLEASE DESCRIBE ANY BEHAVIORS WE SHOULD BE AWARE OF IN ORDER TO PROVIDE OPTIMAL CARE AND SAFETY FOR YOUR DOG _____

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WEIGHT _____ COLOR _____

MEDICATIONS/SUPPLEMENTS: _____

Pet Care Emergency Authorization Form

To Whom It May Concern:

I, _____ (owner's name), owner of the below-described dog, authorize Splash Premier Pet Resort to make emergency veterinary medical decisions, including euthanasia (unless noted below), for the dog described below in the event that I cannot be reached. Where applicable, I have also listed guidelines and limitations of care. I accept financial responsibility for the emergency care of the dog(s).

Owner's name: _____

Owner's contact information in case of emergency (cell phone): _____

Other contacts (names and phone numbers) who might be able to reach owner:

Dates of travel or expiration date of this form: _____

Dog's name: _____

Breed / markings: _____

Age: _____ Weight: _____ Sex: _____

Microchip number: _____

Vaccination dates: DHPP _____ Rabies _____ Bordatella _____

Other _____

Medications (name, dosage, form, reason for medication):

Other instructions:

I authorize emergency veterinary care costs up to \$_____.

I do NOT authorize euthanasia without my direct consent. YES NO

In the event of my dog's death, I wish for the following to be done with his/her remains:

I do NOT authorize the following procedures/treatments:

Owner's name (print): _____

Owner's signature: _____

Date: _____