

DAYCARE AND OVERNIGHT BOARDING AGREEMENT



I _____ attest that my pet is healthy enough to attend daycare or boarding and has NOT demonstrated any signs of un-provoked aggression towards any other pet or person. I have listed ALL known allergies, medications or dietary needs my pet may require.

There are inherent risk and benefits associated with group socialization of dogs. By signing below, I understand and agree to the risk and desire a socialized environment for my dog while at Furs and Feathers Resort, Inc. ALL playgroups are monitored but it is still possible that during normal play, minor nicks and scratches may occur from some roughhousing with other dogs.

I understand and agree that any problems whether behavioral, medical or otherwise with my pet will be treated as deemed necessary in the sole discretion of Furs and Feathers Resort, Inc. I assume full responsibility and liability with regards to my pet's behavior and health.

I grant Furs and Feathers Resort, Inc. permission to photograph and or use the images in publications or promotions.

Pet owner hereby waives and shall hold Furs and Feathers Resort, Inc., its owners, agents and employees harmless from, and indemnify Furs and Feathers Resort, Inc., et al, against, any and all claims (including without limitation all reasonable costs and attorneys' fees) arising out of or which are caused by the conduct of the pet. It is the intent of the Parties that this provision be construed and interpreted so as to give Furs and Feathers Resort, Inc., et al, the maximum protection available under the law.

MEDICAL RELEASE

Safety and care of your pet is very important to us. They are part of our Ohana , (family). We will do everything to keep your pet safe, however some conditions are beyond our control. If a medical emergency occurs while your pet is in our facility, in Furs and Feathers Resort, Inc. sole discretion, we will try your veterinary office first and if unsuccessful, we will secure medical treatment for your pet from Pet Emergency & Referral Center located at 3579 Northlake Blvd, Palm Beach Gardens, FL 33403 or from another licensed veterinary clinic we select. Once we have secured or arraigned treatment for your pet, we will then notify the owner. Our first priority is the wellbeing of your pet.

I hereby agree to Furs and Feathers Resort, Inc. emergency medical protocol and further agree that I will be financially responsible for any and all cost associated with a medical emergency with a maximum amount not to exceed \$_____.

Owner's Name: _____

Pet's Name: _____

Address: _____

Signature: _____

Date: _____