

Please read carefully, sign and send back or bring with you.

"HOLD HARMLESS" AGREEMENT & LIABILITY RELEASE for Doggie Du Good.

RESPONSIBILITY & LIABILITY:

I have had the opportunity to determine for myself that Doggie Du Good (DDG) makes every effort to provide a clean, reasonably safe, open environment for the pets that are left in its care. I am aware that risks of injury to or loss of my pet exist and it is my express intent to assume all risks of loss. I agree to leave my pet for BOARDING, or BOARD TRAINING AT MY OWN RISK ASSUMING ALL RESPONSIBILITY FOR INJURY, ILLNESS, DEATH, OR OTHER LOSS OR CONSEQUENCE. I have researched the facility, read this agreement, and I AM AWARE OF AND AGREE WITH the "Open Play" environment, outside exercise, and all DDG policies & procedures. I understand that ALL dogs CAN & DO BITE; and (1) I am aware of the RISK of injury to my pet or caused by my pet & (2) I agree that I am responsible and assume liability for any INJURY and or Physical or Financial Damages caused by my pet to another pet, person ,or DDG facility. I agree that I will NOT hold DDG or employees, responsible or liable should an, INJURY, ILLNESS, DEATH or LOSS to or of my pet occur while in the care of DDG, its employees, agents, or contractors and hereby release DDG and its employees, agents, and contractors from any liability or responsibility..

MEDICAL TREATMENT:

In my absence, I give my permission to Doggie Du Good (DDG) to act on my behalf in case of what DDG determines in its sole discretion to be an EMERGENCY or apparent health related issue. I also grant permission for my pet to be transported by car to (1) my personal veterinarian, or (2) Peachtree Animal Hospital or (3) Emergency Animal Clinic for any situation that medical assistance is needed in the sole opinion of DDG while in the care of DDG. I agree to reimburse DDG for all charges incurred for any medical care. I am aware that I have the ability to seek insurance to protect my pet from risks mentioned in this agreement and agree to look solely to my own insurance for any injury, illness, death, loss, or damage concerning my pet. In the event I have no such insurance, I agree to bear all such risks of accident, injury, illness, death, or loss. By way of illustration and not limitation, I understand and agree that I WILL NOT seek money damages or any other relief from DDG should an ACCIDENT, INJURY, ILLNESS, DEATH OR LOSS to or of my pet occur during or following ANY services rendered by DDG or it's employees.

VACCINATIONS/OVERALL HEALTH:

I hereby declare that my pet is current within the calendar year on (1) RABIES (2) Bordetella Vaccinations. I understand it is the policy of DDG to require proof of vaccinations by Vet Records, Verbal Verification, or Current Tags. I also understand that my pet is still susceptible to other illnesses due to AGE, STRESS, Nutrition Levels, Immune System, and exposure to other dogs. I understand that DDG prefers all pets be at least 6 months old, Spayed/Neutered, friendly, sociable, and clean with no Fleas/Ticks. I agree to reimburse or pay for any charges incurred by DDG to bring my pet within these policies if in its sole discretion DDG determines that such charges are necessary in conformity to this paragraph..

IMPORTANT DETAILS:

- (1) I understand and agree that DDG is NOT responsible for misplaced, lost, damaged or broken items.
- (2) I understand and agree to the rates, payment terms, & the hours of operation for DDG.
- (3) I understand that if I am NOT satisfied with the services provided by DDG, that I will notify DDG by close of business the following day.
- (4) I understand that DDG has the right to refuse and/or terminate service to any pet that is aggressive, bites, unmanageable, too loud, or NOT suited for the DDG environment.
- (5) I understand that DDG will NOT release my pet to anyone without my consent and or without payment in full for all services.
- (6) I understand and agree that this agreement will remain in force and effect each and every time I utilize services of DDG.

PET Name:		Owner Name:	
Street Address:			
City:	State	Zip:	_
Home Phone:		Mobile Phone:	
Email:			
Signature of Owner:			_
Date:			