



*DogWood Kennel (DWK) strives to provide a safe, healthful, and fun-filled experience for all guests. Please remember your pet will be with other pets, and the health and safety of ALL guests is foundational. DWK reserves the right, in its sole discretion, to prohibit pets whose history, profile, temperament, health or owners are not a fit. The following provides information about policies and practices. Staff are happy to answer questions.*

## Owner Agreement with DogWood Kennel

**REQUIRED DOCUMENTS & VACCINATIONS** I certify I have read, understand, and agree to abide by the conditions and statements of this Owner Agreement with DWK, in whose care, custody, and control I am leaving my pet(s). I certify I am the owner or appointed guardian of my pet and have the right to make decisions and commitments regarding my pet. I understand documentation of veterinary-administered vaccinations, signed Owner Agreement and Medical Release must be on file before receiving DWK services. I understand it is in the best interest of pets to have vaccinations and updates at least one week prior to services. Required vaccinations include

- Rabies,
- Distemper combo,
- Leptospirosis,
- Bordetella, and
- Canine Influenza (highly recommended but not required at this time).

**ASSURANCE of WELLNESS** DWK is a wellness facility and not a medical clinic. Dogs in poor health, immuno-compromised, or in need of invasive or complex medical care (eg injections or chemotherapy), as these pets are better candidates for veterinary boarding. I understand DWK staff are not medical providers. I assure my pet is in good health, fully vaccinated, and has not been ill with any communicable condition in the past 30 days, including internal and/or external parasites. I understand that other pets can carry non-symptomatic contagious conditions that can be shared with my pet, such that the DWK staff, in all due diligence, cannot ensure that the facility and pets therein are free of such contagious agents or conditions, which are easily picked up in dog parks, veterinary clinics and other public facilities where dogs congregate.

**TESTAMENT of APPROPRIATE TEMPERAMENT** DWK attempts to keep pets in a situation approaching the comfort of home; dogs are often unleashed, invited through open doors, walk past other dogs, and go on potty breaks with appropriate "friends." I understand that in receiving DWK services the staff rely on my representation that my pet has not harmed or shown aggression or threatening behavior toward any person or animal. I understand I am obligated to share concerns with DWK staff so they can make informed decisions about managing my pet's activities. I understand I am solely responsible for any harm, damage, or injury to another person or animal caused by my pet while my pet is at DWK. I agree to pay all attorney fees, legal expenses, and associated costs incurred by DWK if my pet harms another pet or human while at DWK.

**STANDARDS for CARE** DWK is committed to high standards: pet care, supervision of pets, building design and cleaning. I understand DWK will exercise guardianship of my pet based on DWK's knowledge and experience and information I provide about my pet. Efforts will be made to consult with me in the event of a problem that arises; however, I agree that my pet may be treated as deemed by DWK staff and at their sole discretion. I waive and release DWK, its employees, officers, volunteers, and agents from liability of any nature for injury or damage to my pet. I expressly assume the risk of such injury or damage while my pet is in the care, custody, and control of DWK. I hereby waive all incidental, consequential, and exemplary damages and agree that the limit of liability of DWK for damages of all kinds shall be \$100. I hereby waive any rights to trial by jury.

**SPECIAL NEEDS & MEDICAL CONCERNS** If my pet has special dietary or medical needs, I will provide the food and/or over-the-counter medicine in labled packages. I will bring prescribed medication in the prescription container. DWK staff will dispense prescription medicine as prescribed by the veterinarian. Any deviation from the prescription must be approved and verified by the veterinarian. In the event a medical concern occurs while my pet is in the care, custody and control of my pet, DWK staff will attempt to contact me and my contacts as quickly as possible, administer aid, and if necessary, procure veterinary care from my

veterinary clinic, Purdue College of Veterinary Medicine Animal Emergency Service, or another service to include rehoming my pet at a clinical facility. I assume full financial responsibility for any expenses incurred for treatment of accidental injury, illness, or symptoms arising during or after a pet's stay at DWK and understand that I may be billed by a separate provider or DWK may need to be reimbursed.

**RESERVATIONS & CANCELLATIONS** Advance reservations are required for services. I understand DWK staff hold a space for my pet precluding that accommodation for another client. If a cancellation is necessary, I agree to give DWK as much advance notice as possible. I understand if I fail to cancel a reservation, I may be required to pay in advance for future reservations.

**LOBBY HOURS** DWK's lobby is open to the public Monday through Friday: 7-9am & 4:30-6:30pm; Saturday morning 7-9am & Sunday evening 4:30-6:30pm. I understand that DWK staff expects me to bring my pet and pick up my pet during these times. I may be able to arrange for the lobby to be opened at other times during normal business days for an additional staffing charge.

**FOOD, TOYS, TREATS & BEDDING** I understand I can provide amenities from home for my pet, such as washable bedding, treats, and/or safe toys (no ropes or rawhide). Items should be labeled with the pet's first and last name. I understand DWK cannot guarantee all items will be returned or be in the same condition they arrived in. I understand pets are often subject to GI upset with a change in diet. It is best to bring my pet's accustomed food in an amount adequate for the reservation.

**SELECTED ACCOMMODATIONS** I understand DWK staff are trained and experienced with variations in accommodations and have the final determination as to which accommodation is best for my pet. Factors such as length of stay, activity level, age, proximity to outside doors, confinement concerns, roommates, weather, etc are considered. I understand DWK staff may move my pet if determined reassignment of accommodations is in the best interest of my pet, DWK or other pets.

**PAYMENT FOR SERVICES** I understand and agree that payment for DWK services is due in full at the time services are rendered. DWK rates are subject to change. Sleepover rates are nightly and based on my preference and/or availability of accommodation, DayPlay rates are daily, grooming fees are determined by breed, coat type, and condition, and training rates are determined on an individual basis in consultation with DWK's trainer. In the event of the need for long-term care, I understand I will be expected to arrange weekly payments throughout the stay.

**ABANDONMENT** I understand and agree that if my pet is not picked up by the date arranged, I authorize the cost of any resulting continued care at the same rate as contracted plus a daily fee equal to the contracted rate. If I do not pick my pet up, I agree to pay any and all associated costs incurred by suspected abandonment. I understand DWK will attempt to contact me and emergency contact names I provided, and failed attempts may result in DWK placing my pet in foster care after three days of suspected abandonment. After seven days of suspected abandonment, DWK may attempt to re-home my pet. I give DWK the right to surrender my pet to a shelter or person if I have not arranged an alternate plan and failed to pick my pet up after seven days. I understand that DWK will not be expected to assume perpetual housing and care of a pet where there is suspected abandonment.

**CAMERAS & MUSIC** I understand DWK uses cameras for security, promotional purposes, and distance viewing by staff and pets' families. Mine or my pet's image may appear in any of these. I give DWK permission to use and disseminate these images without express consent. DWK uses overhead music for relaxation and diversion. I understand DWK adheres to Copyright and Fair Use Guidelines in all use of audio and video programming.

**REVOCATION of THIS AGREEMENT** I certify I have read, understand and agree to this agreement, and it remains in effect for this and all future visits for all of my pets left in DWK's custody, care, and control unless I revoke it in writing, deliver the written revocation to DWK, and take possession of my pet. Revocation shall not effect liability for any visit prior to the effective time of revocation. DWK reserves the right to prohibit services to any pet or guest deemed a poor fit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_



## Medical Release

*The safety and well-being of your pet(s) is of the utmost importance to us. With your help, we will do our best to ensure your pet be as healthy as possible by screening for pre-existing health conditions and monitoring the comfort and wellness of your pet during his stay, but some situations may arise that are beyond our control. In the event a medical concern or emergency occurs while your pet is in our care and custody, we will use our discretion to determine the best option for the situation, whether that be a consultation or visit to your veterinarian, the closest veterinary clinic, Purdue University Small Animal Hospital or Purdue College of Veterinary Medicine Animal Emergency Service. You or your emergency contact will be notified as quickly as possible. To use DWK services, all pet owners are required to agree to this contingency.*

**I understand and agree in the event of a medical concern or emergency, DogWood Kennel, at its sole discretion, has the authority to procure the immediate assessment, treatment, and ongoing care of a licensed veterinarian for my pet(s). This includes my approval for transportation. I further agree that I am financially responsible for any medical advice and treatment that my pet(s) receives as the result of a medical concern while my pet is in the custody and care of DogWood Kennel.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_