

Pet Degree Dog Training Center LLC

“Agreement to Hold Harmless, Waiver, Assumption of Risk ”

Please take a moment to review our policies carefully. All first time potential overnight training dogs require a consultation. It is important for your dog to become familiar with me, and you to become comfortable with my training and care standards. Consultation fee will be credited toward the final service fee.

Your dog will be staying overnight and receiving training daily during their stay. A follow up lesson is included in your fee. You understand that the degree to which a dog is successfully trained is a function of the interest, commitment and cooperation of the owner. You acknowledge and agree that there is no guarantee that your dog will achieve the desired level of training, despite the best efforts of the professional trainer. Old habits may return without consistency continuing at home to reinforce learned behaviors.

It is my intention that your dog be handled with the greatest of care. As a dog owner you understand the risks involved. The unpredictable personality of dogs can sometimes lead to injury. The liability of any circumstance related to your dog will not exceed the current chattel value of a dog of the same breed as the one in my care. By signing this agreement you acknowledge and understand the risk that unexpected situations may arise during your absence or a stress related condition upon return.

Owner's Name _____

Address _____ Town _____ CT Zip _____

Phone _____ Cell _____

Email _____

Dog's Name _____ Breed _____ Age _____ Neutered Spayed

Is your dog fully housebroken? YES / NO Crate Trained ? YES / NO

Does your dog eliminate on leash ? YES / NO Keyword _____

Food _____ Quantity _____ # times per day _____ allergies? Y/N

Veterinarian _____ Phone _____

Required vaccination dates: Rabies _____ DHLPP _____ Bordetella _____ Fecal _____

(All vaccinations must be given 7 days in advance of services. Copy of rabies certificate. Proof of a recent negative fecal test including **giardia test**. Certificate of good health from your Vet or titer acceptable.)

Method of prescription flea control _____ Date _____ Heartworm Preventative _____

Has your dog ever growled at or bitten a person or another dog? If yes, explain _____

Does your dog have *problems* with: **small children** Y/N **cats** Y/N **barking** Y/N **touching collar** Y/N
sharing food or toys Y/N **stealing** Y/N **carsick** Y/N **destructive chewing** Y/N **fear strangers** Y/N
marking Y/N **nipping** Y/N **loud noises** Y/N Is your dog: **allowed on furniture** Y/N

Circle desired training: **basic commands - housebreaking/crate training - leash walking - recalls daycare approved - riding in car - comfortable w/grooming - AKC CGC test ready - outdoor activities**
 (Additional time and fees may apply for advanced levels of training or specific needs) _____

“Waiver” continued

Has your dog ever been boarded? _____ where _____ list any problems on back _____ →

Is your dog an escape artist? _____ (ID tags are required) if yes, explain on back _____ →

Where was your dog obtained from _____

Describe any medical problems or physical limitations _____

List any medications to be administered and directions _____
(additional fees apply \$2.00 each pill or drops)

Helpful info about your dog/ history _____

As the owner of _____ you have agreed to reimburse Lynne Brouard for all incurred expenses in full while your dog is in her care immediately upon return of your pet or late fee of \$25 per day will be charged. Expenses will include but not be limited to the purchase of additional food, grooming, transportation expenses, personal property damages, late charges or emergency medical care as well as administering medication fees. Payment will be expected by cash or check only (return check fee \$25) *We do not accept credit or debit cards.*

If you have scheduled a grooming appointment for your return, it may in some cases be deemed necessary *prior* to your return date. Baths may be given between grooming appointments with an additional fee charged when doggie odor is found to be offensive.

Loss or damage may occur to items left with your pet including but not limited to collars, leashes, special bedding, bowls, favorite toys etc. Please leave only what is necessary *at your own risk*, I can not be held responsible for any items the may be unable to be returned. When your dog will be attending daycare they need a snap collar. If they come without one, you bought one.

Permission will be granted for your pet’s transportation by car. Home drop off /pick up fees apply when requested.

In the case of an emergency, you agree that your dog can be treated by a Veterinarian that may not be your own. All emergency medical care will be at the judgment, assessment and discretion of Lynne at the time the decision needs to be made whether you have been reached or not. You agree to the release of medical and proof of vaccination records from the named Veterinarian to Lynne Brouard or a designated representative of Pet Degree Dog Training Center and will make payment arrangements with the animal hospital direct when at all possible.

All efforts will be made to contact you or the person you request and make you aware of any emergency situation should any arise. It is your responsibility to leave up to date contact information of how and whom you want to be informed. I can not be held responsible for the inaccuracy of any information or statements made by yourself.

Emergency Contact other than self _____ Phone _____

Alternate LOCAL Contact _____ Phone _____

Please print clearly!!!!!!!!!!!!

"Waiver" continued

You agree to release, indemnify and hold harmless any and all manner of damages, claims, losses, liabilities, costs or expenses, cause of action suits, whatsoever in law or equity (including without limitation, attorney's fees, and related costs) arising out of or related to services provided by Lynne Brouard and the Pet Degree Dog Training Center LLC. *Lynne Brouard reserves the right to refuse any services for any dog at any time for any reason.*

In the rare instance of a dog bite, you will take full responsibility for all proof of licensing, current vaccinations, any and all insurance related claims.

Daily fee \$ _____ + sales tax, per day until 12pm. **(additional daily fee will be charged when picked up anytime after 12:00 p.m.)** Holidays, additional \$10.00 fee will be added. A 2 week minimum stay is required, 3 weeks recommended for reliability.

Dates: _____ Total Fee: _____ Deposit Paid: _____

***All reservations require a 50% non refundable deposit. Deposit must be paid in advance at time of booking, prior to services. Start dates are subject to change based on space availability.** (example: your Vet check requires a waiting period or another dog unexpectedly stays longer postponing your start date. Consult us before making any vacation arrangements during this time.)

Remaining fee due upon pick up by cash, money order, bank or E check only. No personal checks accepted.

Booking popular dates may have turned others away, therefore be cautious when making reservations that might require changes. **If you cancel or attempt to transfer dates and the space you reserved can no longer be re-booked, the CANCELLATION FEE will equal your deposit. Your deposit is transferable only if/when your original space can be rebooked by another client. We will make every attempt but can not guarantee rebooking.**

If for any reason your PICK UP schedule changes, 24 hour extension notice is required to make arrangements for your pet to stay longer. Additional fees will apply. Due to limited space, I can not guarantee, but will make all attempts to accommodate your needs or your emergency contact will be called. Payment will be expected at that time for release of your pet. Dogs left for any period of time longer than mutually agreed upon will be considered abandoned and rights relinquished to be done with as seen fit in re homing.

Pet Owner's signature is proof of acceptance of all terms and conditions and the release of liability. To the best of my knowledge all statements made are *truthful*. If found to be inaccurate, additional fees will apply. This agreement has no time limit and is valid and enforceable for any and all future stays for our pet and will be updated annually or Lynne notified when any change arises such as Vet info, phone numbers or new contact info.

>Owner's Signature _____ Date _____

Printed Name _____

Note: When dropping off your dog, please say goodbye prior to arrival at my home or the Center. To make the transition as easy as possible for all, I ask that you make the transfer quickly and without much "to do". I find that dogs will settle into our routine just fine and enjoy their stay when emotions are kept to a minimum. To speed up the process, you may email your instructions to petdegree@aol.com in advance of your scheduled departure day and I will contact you with any questions.

Children should not accompany you as we will need to keep the drop off under 5 minutes. Please only bring what is absolutely essential with you. Remember we are a dog friendly house that has everything your dog may need other than your specific food and meds. "Here you go, bye" is perfectly acceptable and the preferred drop off etiquette. Thanks for your cooperation.

(Please retain a copy of our agreement for yourself.)

Application must be returned at least 1 week prior to services or sooner along with current vaccination records.

Pet Degree Dog Training Center LLC (203) 268-2275
100 Corporate Dr. B101 Trumbull, CT 06611

Lynne Brouard, VM (203) 260-3507 use after hours only!
E-mail: petdegree@aol.com