

## **PLEASE READ CAREFULLY BEFORE SIGNING**

**RELEASE AND WAIVER:** By filling out this application and signing below, I hereby release M3DS, LLC dba My Three Dogs and all associated parties and its owners, members, investors, officers, managers, employees, and agents (hereinafter referred to as “My Three Dogs”) from any and all liabilities for injuries or illnesses to myself, my dog, or any other property of mine which may arise in any way out of services and/or products provided by My Three Dogs. I understand this is a full, complete and knowing release with no right of recourse.

**ANIMAL UNPREDICTABILITY AND VOLATILITY:** I understand that every dog reacts differently and that animals by nature are unpredictable. I understand and acknowledge that dogs and animals may bite or cause other injury to humans and other dogs without warning or reason. I acknowledge and understand that there are certain risks involved in a social environment, day care and grooming, including but not limited to dogfights, dog bites to humans or other dogs, and the transmission of disease.

**INDEMNITY:** The undersigned, by execution of this document, agrees that he, she or they shall indemnify and defend My Three Dogs and hold each of them harmless from any claim, demands, causes of actions or damages, including reasonable attorneys fees, arising out of any action or damage or injury done or caused by their dog to any animal, individual or individuals while in the care of My Three Dogs. Any medical expenses will be my responsibility and I release My Three Dogs from any charges.

**SPAY NEUTER POLICY:** I also understand that all dogs must be spayed or neutered, on a flea/tick preventative program, and up-to-date on DHLPP, Rabies, and Bordatella (MUST BE UPDATED EVERY 6 MONTHS).

**HOURS OF OPERATION AND CHARGES:** I also understand that My Three Dogs’ hours are Monday – Friday from 7am to 7pm, and I must promptly be picked up by animal before 7pm (or 1pm for half-days). Late charges of \$1.00 per minute will be applied otherwise. Reservations for boarding and grooming are required, and cancellations not made by 6:30pm one business day prior to the scheduled visit will be charged full fees and invoiced to the parent. By signing below, I accept exclusive and sole responsibility, financial or otherwise, for these and all other risks and release My Three Dogs and all related parties of all liability.

**MEDICAL EMERGENCY POLICY:** In case of medical emergency and I understand that full effort will be made to reach me or my emergency contact. However, failing so, I give full permission for My Three Dogs to make any needed decision concerning medical treatment of my dog(s). I authorize urgent veterinary treatment of my animal(s) and I understand that I will be fully responsible for all fees and charges incurred on my behalf. My Three Dogs reserves the right to utilize the services of any available veterinary clinic. I understand that a fee of \$25.00 will be assessed to cover the transportation cost of taking my animal to and from the vet and/or drug store to pick up medications. I agree to reimburse My Three Dogs for the cost of the medications.

I understand that My Three Dogs will (as a courtesy) administer medications to my dog if I request them to do so but that I will not hold My Three Dogs liable in any way in relation to administering medications.

NATURAL DISASTER POLICY: In the event of a natural disaster (ie Hurricane, tornado, flooding, earthquake, etc.) I understand it is my responsibility to pick up my pet (or make arrangements for pick-up) in a timely manner and in accordance with any mandatory evacuations etc. I understand that My Three Dogs will do everything reasonably possible to secure the safety of my pet during a natural disaster and I agree to indemnify, release and hold My Three Dogs harmless of any and all liability related to any natural disaster of any sort.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please initial below statement as well.

{\_\_\_\_\_} I understand that prior to boarding my dog at My Three Dogs my dog is required to attend doggie daycare for a trial visit. Standard daycare rates apply for this trial visit.

VETERINARIAN INFORMATION

Veterinarian: \_\_\_\_\_

City: \_\_\_\_\_

Owners Name (Please  
Print) \_\_\_\_\_

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

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