



### Daycare Waiver

I hereby release Blue Collar doggie daycare, LLC and all associated parties and its owners, members, investors, officers, managers, employees, and agents (hereinafter referred to as "Blue Collar") from any and all liabilities for injuries or illness to myself, my dog(s) or any other property of mine which may arise in any way out of service and/or products provided by Blue Collar. I understand this is a full, complete and knowing release with no right of recourse. Good until revoked by either party verbally or in writing.

I understand that in Blue Collar admitting my dog(s) it has relied on my representation of my dog(s) to determine that my dog(s) is/are in good health, has/have not shown aggression, and has/have not harmed or exhibited threatening behavior toward any person or another dog.

**ANIMAL UNPREDICABILITY 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 group socialization, daycare, and grooming environment, included but not limited to dogfights, dog bites to humans and other dogs and the transmission of disease. I further acknowledge that there are risks, and benefits associated with group socialization of dogs. I agree that the benefits outweigh the risks and that I accept the risk. While the socialization and play are carefully and closely monitored by the staff to prevent injury, I understand that it is still possible for my dog(s) to receive injuries from contact with other dogs and that I will be solely responsible financially should such injury occur.

I understand that any behavior deemed dangerous or inappropriate may result in dismissal from daycare and if such behavior occurs Blue Collar will treat the behavior at their discretion and that I am solely responsible for any harm or damage that my dog(s) cause(s).

**HOURS OF OPERATION AND CHARGES:** I also understand that Blue Collar hours are Monday thru Friday 7:00 a.m. to 6:00 p.m., and I must promptly pick up my dog(s) before 6:00 p.m. A \$15 late fee will be charged for each dog not picked up by 6:00 p.m. By signing below, I accept exclusive and sole responsibility, financial and otherwise, for these and all other risks and release Blue

Collar and all related parties of all liability. A \$40 NSF/Returned check fee will be charged to your account for any checks declined to be paid or returned to us as unpaid from our bank.

INDEMNITY: The undersigned, by execution of this document, agrees that he, she or they shall indemnify and defend Blue Collar and hold each of them harmless from any claim, demands, causes of actions or damage or injury done or caused by their dog(s) to any animal, individual or individuals while in the care of Blue Collar. Any medical expenses will be my responsibility and I release Blue Collar from any charges.

VACCINATION POLICY: I also understand that ALL DOGS MUST BE ON A FLEA AND TICK PREVENTATIVE PROGRAM, AND UP TO DATE ON RABIES, DISTEMPER AND BORDETELLA (Kennel Cough). Puppies can begin daycare after they have received their Bordetella and 2nd Distemper vaccinations; we will need proof of the Rabies and 3rd Distemper shots once received.

ALLERGIES, SPECIAL DIETS, MEDICATIONS: I agree that I will disclose to Blue Collar any allergies my dog(s) may have. I further agree to disclose to Blue Collar any special dietary needs or medications my dog(s) may require, if necessary, during activities at Blue Collar.

MEDICAL EMERGENCY POLICY: In case of a medical emergency, I understand that full effort will be made to reach me or my emergency contact. However, failing so, I give full permission to Blue Collar to make any needed decision concerning medical treatment of my dog(s). I authorize urgent veterinary treatment of my dog(s) and I understand that I will be fully responsible for all fees and charges incurred on my behalf. Blue Collar reserves the right to utilize the services of any available veterinary clinic.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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