

The Pawparazzi Lounge Daycare Contract

I understand that my dog(s) will have close & intimate contact with other dogs during Daycare. I understand that the Dog Day Care Staff will not knowingly admit dog(s) into the play area with that are obviously aggressive. If, however, a dog acts out of character or unpredictably & my dog is injured I agree not to hold The Pawparazzi Lounge agents or staff liable in any way for these unforeseen acts. If injury occurs the The Pawparazzi Lounge staff will attempt to contact me. If they are unable to contact me for whatever reason, I authorize medical or surgical treatment if needed to provide for the safety & comfort of my dog & agree to pay for any fees, which may result.

I certify that I am the pet owner, and that I am authorized to board the pet and sign this form. I authorize to contact my veterinarian in order to confirm health, temperament and vaccinations. I give consent The Pawparazzi Lounge to act on my behalf by obtaining veterinary care at my expense, should The Pawparazzi Lounge deem it NECESSARY. I have read the schedule of fees and agree to pay all charges at checkout. I authorize The Pawparazzi Lounge to charge my credit card account for any outstanding invoices. I release The Pawparazzi Lounge (and its agents and employees) from any liability or claim due to injury or death of my dog. I understand that under no circumstances will The Pawparazzi Lounge be liable for damages. As owner I agree to pay the fees of service on the date or prior to the dog's check-in into the business. As owner I agree that the said pet will be picked up by me the owner or an approved additional person by the close of business. If the pet is picked up after stated time of close of business, I the owner agree to pay any additional charges set forth by the business. It is understood by The Pawparazzi Lounge and Owner that all provisions of this Contract shall be binding upon both parties thereunto for this visit and for all subsequent visits.

Pet Owner:

_____ Date: _____
NAME

_____ Date: _____
Local Phone