

Boarding Waiver and Consent Form

This agreement shall apply to all boarding visits by your dog to Cozy Days Dog Boarding.

Please initial next to every point to indicate that you have read and understood.

I represent that I am the legal owner or authorized by the owner of the dog(s) described on the **Detailed Information about your dog form**._____

I represent that my dog(s) is in good health, is currently on all required vaccination such as Rabies, and Bordetella (Kennel Cough). Is free of fleas, ticks and lice and has not been ill within the last 30 days._____

I understand that while my dog(s) is fully vaccinated, vaccines are not guaranteed, and there is a small risk that my dog(s) may contract a contagious disease or illness. I agree that should this occur, I am responsible for my own pet's care, medical attention, and costs._____

I release Cozy Days Dog Boarding ,its staff, owners and any representatives from any and all liability which I or my dog(s) may suffer including but not limited to injury, sickness, damage, or death resulting from participation in daycare and boarding._____

I understand that although all dogs are fully supervised, incidents of injuries may occur from playing with other dogs, which includes but not limited to bites, scrapes, scratches and sprains._____

I represent that my dog(s) is social and has not harmed or shown threatening behaviors towards any person or other dog. I understand Cozy Days Dog Boarding reserves the right to remove my dog from the play area and place my dog(s) in a separate holding area should my dog(s) display and unwanted behaviors._____

I allow Cozy Days Dog Boarding's staff to contact my veterinarian should any injuries or illness require medical attention. _____

I agree that I am solely responsible for any medical expenses acquired for my dog(s). _____

In the event that I or my authorized contact cannot pick up my dog(s) at the agreed pick-up time, I authorize Cozy Days Dog Boarding to provide additional overnight and daycare services at my expense. _____

During holidays and holiday weekends (New Years, Easter, Memorial Day, 4th of July, Labor Day, Thanksgiving, Christmas) we will require a 2-day payment for guests that cancel 10 days prior to their scheduled booking. _____

With my signature below, I certify that I have read and understood the agreement and waivers. I agree to abide by the regulations and accept all terms and conditions as set out.

Signature: _____

Print Name: _____

Date: _____

Dog(s)Name(s): _____