

CLIENT AGREEMENT FORM

600 West Woodbury Rd.
Altadena, California
91001
scott-foxpuppypreschool.com

SCOTT-FOX



**PUPPY
PRESCHOOL**

WHERE THE
PUPPY YOU FELT
FOR BECOMES THE
DOG YOU LOVE

Client Agreement for Puppy Preschool Services: Scott-Fox Puppy Preschool (hereafter, SFPP) agrees to provide puppy day care and training services for the undersigned's (hereinafter also referred to as "I" and "my") puppy or puppies (hereafter puppy) in accordance with SFPP policies, procedures and prices (please refer to accompanying documents regarding specifics as to same) and commits to exercise reasonable and professional judgment in the provision of all such services for you and your puppy(s).

I, (print first and last name _____)

represent to SFPP that I am the owner/guardian of (specify Puppy name and breed):

that I am fully authorized and competent to enter into this agreement for services from SFPP, and that I am responsible for and will timely pay for the cost of all services in accordance with this Client Agreement for Puppy Preschool. I understand the inherent risk involved in leaving my puppy with caretakers and other puppies at SFPP and acknowledge the following (please initial each of the following statements):

_____ I understand that my puppy may get scratched, nicked, soiled, injured or ill in the normal course and scope of services provided.

_____ I understand that my puppy may injure another puppy and/or individual.

_____ I assert that my puppy is in good health and current on all required vaccinations for his/her age.

_____ I confirm that my puppy is flea and tick free.

_____ I confirm that my puppy has not had any communicable condition in the last 30 days.

_____ I understand that an emergency situation or natural disaster may arise that will require evacuation, relocation, transportation and/or treatment of my puppy, with or without prior or simultaneous notice to the undersigned.

_____ I understand that SFPP will rely on the information in this agreement and other documentation submitted to provide services to my puppy.

_____ I understand that water is regularly offered to puppies throughout the day while at the SFPP facility and further understand that the increased level of daily activity may make my puppy more thirsty than usual when returning home. I will monitor my puppy's water intake upon arrival home, as excessive intake may cause an upset stomach and/or other symptoms.

_____ I hereby grant permission to SFPP, and therein to its owners, employers, contractors, and/or agents to take any and all action necessary to secure the well-being of my puppy including any medical attention deemed necessary during puppy care at SFPP.

_____ I realize that there may be times when reasonable deterrent measures become necessary, such as painless water sprays, and in the rare event of such use, it will be documented by SFPP staff and I will be notified if the reason(s) for such use was caused by my puppy.

_____ I understand that SFPP highly respects my privacy and that of all its clients and will not release any customer names, addresses (e-mail or residential) or phone number(s) to any other party unless such release becomes required by law/legal authorities.

_____ I understand that SFPP reserves the right to refuse or revoke admittance to any puppy who does not meet the health requirements set forth by SFPP or who will not benefit from the SFPP program as determined by the SFPP canine behaviorist and trainer.

_____ I understand that on occasion my likeness or my puppy's likeness may be captured in video, still photograph or other media while staying at SFPP, and I hereby authorize SFPP to use, broadcast, stream, electronically transmit, and/or reproduce in any form, such likeness in video, print or any other distribution channel, and I agree that I will not be compensated for any such use.

_____ Although it is the practice at SFPP to have staff supervising or interacting with the puppies at all times, I understand there may be occasion(s) where my puppy may be left alone and/or with other puppies for a brief time, including times when my puppy is in a crate or exercise pen.

_____ I understand that reservations are accepted, but are not necessarily guaranteed, and that circumstances may arise on occasion such that my puppy may need to be picked up earlier than arranged from SFPP.

_____ I have provided information designating at least one emergency contact and this/these individual(s) may be contacted to exercise full and complete authority for decisions regarding my puppy while under the care of SFPP.

_____ I understand that in a rare emergency situation when SFPP cannot reach me or my emergency contact(s) or there is no reasonable opportunity for such contact, that SFPP is authorized, at its sole discretion, to engage the services of a veterinarian designated by client or if necessary as selected by SFPP personnel to medically attend to my puppy and to take whatever necessary action is appropriate to the emergency. I understand that I am responsible for any veterinary bills incurred on my puppy's behalf, whether or not it resulted from something that happened at SFPP or outside of SFPP or was caused by my puppy or any other puppy, dog, or individual. I agree to hold SFPP and its employees, contractors and agents harmless, and agree to reimburse SFPP for any veterinary costs or other necessary expenses for my puppy within thirty (30) days from when said veterinary services were incurred.

I agree to indemnify SFPP for any and all loss, liability, claims, expenses, demands, causes of action, suits, rights, and entitlements of any kind caused by or related to my puppy during the course of its participation in SFPP, including without limitation, legal costs and attorney fees.

I further agree to release and hold harmless, SFPP, its owners, employees, contractors, agents or otherwise from any and all loss, liability, claims, expenses, demands, causes of action, litigation, and entitlements of any kind, whether known or unknown, suspected or unsuspected, relating in any way to the services provided herein, including without limitation, injury, death, sickness, or damage my puppy may suffer during or after participating in daycare, training or at any other time while puppy is in the care of SFPP.

Further, I understand that I am 100% responsible for my own puppy, physically, financially, and in regards to health, injury, or otherwise, even if not the fault of my own puppy; and I assume all responsibility for all costs associated with the reason-

able treatment and handling of my puppy and my property while under the care of SFPP and I release SFPP, its owners, employees, contractors, and agents from any and all liability as to my puppy while in puppy the care of SFPP.

This agreement shall govern future services to be provided by SFPP to me, as authorized by me, in person, by telephone, mail, email, or other means.

I certify that I have read the SFPP policies, procedures and prices, as they appear on the website, and understand and agree and intend on my own behalf, and on behalf of my agents, representatives, relatives, successors, heirs, and assigns, to be bound by all the terms and conditions contained therein and in this Client Agreement for Puppy Preschool and Day Care Services. In addition, I remain liable for all charges incurred during my puppy's stay and acknowledge that SFPP reserves the right to collect any unpaid balance for services rendered to my puppy. I further certify that I have read and initialed each statement above and accept the terms and conditions of this Agreement and certify that the information I have provided to SFPP is true, accurate and complete.

This document represents the total agreement between the parties as to the provision of puppy care and training services. Should any section of this agreement later be determined at any point in time to be legally non-binding for any reason, the rest of this agreement shall continue to be legally valid and operative.

Puppy Owner Printed Name: _____

Puppy Owner Signature: _____ Date: _____

Legal Address: _____

E-mail : _____ Phone _____

For Scott-Fox Puppy Preschool:

Printed Name: _____

Signature _____ Date: _____