

**YOU WORK, I'LL PLAY (YWIP)
Daycare Client Agreement**

Dogs may, without warning, bite or cause injury to humans and other dogs. I acknowledge and understand that there are certain risks involved in participating in daycare, including but not limited to dog fights, dog bites to humans or other dogs, and the transmission of disease. I acknowledge that every dog reacts differently and that animals, by nature, are unpredictable.

Please read and initial each statement below:

____ I understand that by admitting my dog(s) to YWIP I am granting permission for my dog(s) to mingle and socialize with other dogs.

____ I understand that dogs unfamiliar with YWIP may, at first, experience separation anxiety.

____ I understand that higher levels of activity than dogs are used to may result in sore muscles, sore joints, or fatigue and that high levels of outdoor or high energy play may result in sore paws, blisters, bruises, or abrasions on the feet.

____ I understand that any behavior deemed dangerous or inappropriate may result in dismissal from YWIP.

____ I understand and agree that in admitting my dog(s) into YWIP, YWIP has relied on my representation that my dog(s) has/have not harmed or shown aggressive or threatening behavior toward any person or other dog.

____ I certify that my dog(s) is/are in good health and has/have not been ill with any communicable disease within the last 60 days.

____ I agree to pay for all services due at the time rendered. I understand any unpaid fees by me will be sent to collections and I will be responsible for all collections and legal fees incurred by such actions taken.

____ I understand YWIP staff give all pets involved in any type of incident a cursory examination; however, YWIP is not liable for the location, treatment, or diagnosis of any injuries incurred on YWIP premises.

____ I have read and understand the YWIP "Rules and Regulations."

I, _____ grant YWIP and/or its selected agents full power of decision concerning the care and well being of my dog(s). I understand that YWIP will make every effort to contact me; however, should any medical emergency arise and I am unreachable, it is agreed that YWIP or its selected agents can and will make any needed decision concerning medical treatment and choice of caregiver up to \$ _____. My signature below authorizes the use of my credit card for said purpose.

I, _____, hereby hold harmless *YOU WORK, I'LL PLAY Dog Daycare and Training*, their successors and assigns, from and against any and all claims, causes of action, demands, losses, costs, damages, and expenses (including, without limitations, expenses of litigation, court costs, and attorney's fees) in any way arising from or connected with the liabilities arising in any manner therefrom.

With my signature below, I accept exclusive and sole responsibility for these and all other risks and release YWIP of all liability, no matter the cause.

Credit Card #: _____

Signature: _____

Circle one: VISA Master Card

Print name: _____

Expiration date: _____

Date: _____

Witness: _____