



OWNER INFORMATION:

NAME: _____
ADDRESS: _____
PHONE NO.: _____ VET: _____

Email: _____

EMERGENCY INFORMATION* (if same as above, leave blank):

NAME: _____
PHONE NO.: _____

If you are unable or not available by phone please list an additional local emergency contact below

NAME: _____
PHONE NO.: _____

PET INFORMATION:

Name: _____ Breed: _____
Age: _____ Sex: _____
Color: _____

Immunization Records (if records have already been received or already on file leave blank):

Type:	Expiration:
Rabies	_____
Distemper	_____
Parvo Virus	_____
Bordetella	_____

Has your pet every bitten anyone? _____

Special Instructions:



**Cloverleaf Pet Lodge
Boarding / Daycare
Agreement, Indemnity, Release & Waiver**

I, the undersigned, warrant and certify that I am the owner or person responsible for the dog(s) brought to Cloverleaf Pet Lodge, 558 Carriage Shop Road, East Falmouth, Massachusetts 02536 ("CPL"), for either boarding or daycare and certify the following:

1. I agree to pay the rate for boarding and/or daycare in effect on the date the dog is checked into CPL and that any monies collected are non-refundable.
2. I allow CPL to post pictures of my dog(s) including, but not limited to, CPL website, social media sites and email.
3. I hereby acknowledge that all vaccine records provided are accurate and do not expire while my dog(s) is/are at the facility. I also acknowledge that my dog(s) does/do not have any symptoms of kennel cough and understand it can be transmitted from another asymptomatic dog. I hold CPL harmless from any loss, costs or damages incurred from any kennel cough diagnosis and am participating in overnight boarding and/or daycare at my own risk.
4. I agree that I am ultimately responsible for determining whether boarding or daycare activities are appropriate for my dog(s). I further agree that I am responsible for any risk posed by undisclosed medical conditions or behavior concerns.
5. If pet becomes ill or if the state of pet's health otherwise requires professional attention, CPL, in its sole discretion, may engage the services of a veterinarian or administer medicine or give other requisite attention to the pet. I agree and accept all financial responsibility associated with the veterinary services.
6. I understand that by allowing my dog(s) to participate in any group play activities, I recognize the possible risk involved in this activity, including, but not limited to, scrapes and cuts which are commonplace due to the nature of dog play and more serious injuries cannot be predicted. I accept full responsibility for any illness or injury that might happen to my dog(s), and accept full financial responsibility for any charges that may occur. I also accept full responsibility for any damage or injury to persons, property or animals arising out of my dog's participation in daycare, use of the grounds or facility and the actions and conduct of the undersigned and my dog(s). Accordingly, I agree to indemnify CPL, and its owners, employees and independent contractors, for monetary damages and attorney fees; and further waive all personal claims and releases CPL, its owners, employees and independent contractors for damage, injury or death sustained by me, arising out of my dog's participation in the activities and services provided CPL, or presence on or use of the premises where services are performed; and further waive subrogation claims of insurers. As a client of CPL, I understand

that my dog(s) and any person I bring onto the property enter/participate at our own risk.

7. It is my express intent that this Agreement, Indemnity, Release & Waiver shall also bind the members of my family and all respective heirs, executors, administrators, legal representatives, successors and assigns, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named RELEASEES. I hereby further agree that this Agreement, Indemnity, Release & Waiver shall be construed in accordance with the law of the Commonwealth of Massachusetts.

By signing below, I acknowledge that I have read and fully understand and agree to this Agreement, Indemnity, Release & Waiver.

Signature: _____

Print Name: _____

Dated this _____ day of _____, 2021.