



Paws-a-tive Training
65 Brook Rd.
Lancaster, NH 03584
(603) 788-5588
pawstraining2000@gmail.com

**Owner Liability Waiver, Health Certification, Assumption of Risk, and
Agreement to Indemnify and Hold Harmless**

I, _____, hereby certify that my dog(s): _____
is/are in good health and has/have not been ill with any communicable
condition in the last 10 days. I further certify that my dog(s) has/have not
harmed or shown aggressive or threatening behavior towards any person or any
other dog. I have read and understand the following:

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending Paws-a-tive Training Center.
2. I further understand and agree that admitting my dog(s) to the Center, the Paws-a-tive Training's staff have relied on my representation that my dog(s) is/are in good health and has/have not harmed or shown aggressive or threatening behavior towards any person or any other dog.
3. I understand that attendance in a dog daycare is not without risk to my dog, myself, members of my family or guests who may attend, because some of the dogs to which I (we) will be exposed may cause injury even when handled with the greatest amount of care.
4. I hereby waive and release Paws-a-tive Training and daycare, its employees, owners, volunteers, and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but not without limitation, any injury or damage resulting from the action of any dog, and I expressly assume the risk of any such damage or injury while attending any training session or other function of Paws-a-tive Training or while on the training grounds or the surrounding area.
5. In consideration of and as inducement to the acceptance for training membership in this dog training class, I hereby agree to indemnify and hold harmless Paws-a-tive Training and daycare, its employees, owners, volunteers, and agents from any and all claims, or claims by any member of my family or any other person accompanying me to any training session or function of Paws-a-tive Training and daycare, or while on the grounds of the surrounding area thereto as a result of any action by any dog, including my own.

6. If my dog(s) becomes ill or injured, I authorize agents for Paws-a-tive Training Services to seek veterinary attention for my dog(s) at a veterinarian of their choice. I also agree to pay any and all veterinary costs and understand that in an emergency veterinary care can be costly. All dogs at daycare or otherwise handled by Paws-a-tive Training Services, its employees, owners, volunteers, and agents are cared for without liability on Paws-a-tive Training Services", its employees', owner's, volunteers' and agent's part for loss or damage from disease, death, escape, theft, fire, injury, injury to persons, other dogs or property by said dog, or other unavoidable causes.
7. If a dog is left unclaimed, Paws-a-tive Training Services retains the right. after 10 days and after written notice to the owner's address of record, to dispose of said dog in a humane way. All expenses during this holding period will be the owner's liability regardless of disposal of dog.
8. I represent that I am the legal owner of said dog, that title to said dog is not mortgaged in any way, and that said dog has not been exposed to distemper, rabies, kennel cough, parvo, or other known contagious diseases within the last thirty days. I also attest that said dog is free of worms, heartworm, and fleas (if fleas are found, bathing and topical flea preventative will be done at owner's expense).

I certify that I have read and understand the policies of the Center as set forth on the preceding pages and that I have read and understand the conditions and statements of this agreement, including the following:

In addition to the above, I request my dog(s) has/have dog group play sessions. I understand that even with extreme care in choosing groups and monitoring play sessions that injuries can happen. I hereby agree to indemnify and hold harmless Paws-a-tive Training and daycare, its employees, owners, volunteers, agents, and other dog owners from any and all claims, or claims made by any member of my family or any other person in relation to any and all injuries that may occur.

Date _____ **Signed** _____

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I learned about these classes via: () Friend () Newspaper () Veterinarian
 () Humane Society () Groomer () Other _____