



## Customer Information / Agreement Form and Release of Liability

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

E-Mail Address \_\_\_\_\_

How did you hear about us? \_\_\_\_\_ neighbor \_\_\_\_\_

**Animal #1:** Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Weight \_\_\_\_\_ lbs

Breed \_\_\_\_\_ Color \_\_\_\_\_ Birth Date \_\_\_\_\_ Spayed or Neutered \_\_\_\_\_

**Animal #2:** Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Weight \_\_\_\_\_ lbs

Breed \_\_\_\_\_ Color \_\_\_\_\_ Birth Date \_\_\_\_\_ Spayed or Neutered \_\_\_\_\_

**Animal #3:** Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Weight \_\_\_\_\_ lbs

Breed \_\_\_\_\_ Color \_\_\_\_\_ Birth Date \_\_\_\_\_ Spayed or Neutered \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone# \_\_\_\_\_

Relationship to Owner \_\_\_\_\_

Vet's Name \_\_\_\_\_ Vet Clinic/Hospital \_\_\_\_\_

Persons Authorized to Pick Up and/or Drop off dog(s) \_\_\_\_\_

**\*You must have documentation from your Veterinarian noting that vaccinations for Rabies, Distemper, and Bordetella are current. \***

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*Please read the items below, initial at the bottom, and sign the last page indicating you understand and agree to all of these requirements.*

**This is an Agreement between K-9 Island and the dog owner whose signature appears at the end of the document (hereinafter called "Owner" or "I").**

1. I agree that K-9 Island shall not be responsible or liable for any lost, stolen or damaged personal property. My dog's collar may be removed in the play area to prevent injury to my dog or other dogs.
2. I agree to be fully responsible for any damages to K-9 Island caused by my dog.
3. I agree to allow any K-9 Island owners, employees and agents to use my dog's name and any images or likeness of my dog taken while he/she is at K-9 Island, in any form or format, for use, at any time, in any media, marketing, advertising, illustrations, trade, or promotional materials. I agree that this provision shall be binding on me and all of my successors, heirs, legal representatives, and assigns.
4. I certify to the accuracy of all information given about my dog. K-9 Island reserves the right to deny admittance to my dog for any reason at any time.

Owner's Initials \_\_\_\_\_

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