



Socialization Information and Release Agreement

Owner's Information:

First Name: _____ Last Name: _____ Phone Number: _____
Address: _____ City/State/Zip: _____ Email: _____

Dog's Information:

Dog's Name: _____ Breed: _____ Age: _____ Sex: M MN F FS

Socialization Information

I give Beyond the Leash LLC authorization to use EOA's Daycare program, boarding facility and veterinary services while in there care as deemed necessary while under Beyond The Leash's care. I also give the Beyond the Leash staff permission to take my pet off site for training and socialization purposes.

In case of illness or injury in Beyond the Leash's Care or EOA's care, I _____, the undersigned, do hereby give my consent for the staff of Beyond The Leash, LLC, to treat, approve prescribe medications, or operate on my pet while they are in Beyond The Leash's or EOA's care. All reasonable efforts will be made to contact the owner at the emergency phone number before proceeding. Beyond The Leash, LLC is to use all reasonable precautions against illness, injury or escape of my pet. It is understood that I assume all risks associated with socialization and behavior modification and will not hold Beyond The Leash, LLC or EOA responsible or liable for any circumstances that may occur from the care, treatment, or safekeeping of my pet. Should my pet remain unclaimed after the agreed upon discharge date, I agree that my pet may be considered abandoned after 5 days and that Beyond The Leash, LLC and EOA will be authorized to relinquish said pet as deemed necessary. Abandonment does not release me of payment of services rendered.

Owner or Agent for Pet(s) Signature _____ Print Name _____ Date _____

Daycare/ Group Play at EOA

If your pet's temperament is suitable and approved for group play, he/she will be grouped with dogs of similar size and temperament and will go out to play off leash 3 times during the day. A small risk of injury is involved in group play and by signing below you acknowledge that you are aware of this risk and that EOA and Beyond The Leash Dog Training is not responsible if accidental injury occurs while your pets are here.

_____ **I understand the risks associated with group play and do allow my pet to participate in group play.**

_____ **I do not wish for my pet to participate in group play.**

By signing below, you agree to our daycare policies as outlined above and that you are allowing EOA and Beyond the Leash Dog Training to photograph and post pictures of your pet to social media.

By initialing below, you acknowledge that if your pet should become ill or injured in our care and we are unable to reach you by phone, we will perform whatever services the doctors deem necessary.

_____ **Perform whatever services the doctor at EOA deems necessary for the best care of my pet until someone can be reached.**

*Please note, if your pet is in eminent danger, we will begin treatment deemed as necessary per the treating doctor and you will be financially responsible for the services performed.

- Contact Beyond The Leash, LLC (407) 892-9121 or (508) 208-0282
- Contact the Owner/Agent Phone Number (_____) _____

Owner or Agent for Pet(s) Signature _____ Print Name _____ Date _____



Flow Sticker

7600 Lake Underhill Rd.
Orlando Fl. 32822

Please see behavior questionnaire on other side of page.

Socialization and Behavior Modification

First Name: _____ Last Name: _____ Dog's Name: _____

- Reactive toward people (bites, growls, snarls, bares teeth).
If so, give examples _____
- Destructive in the house or outside.
If so, give examples _____
- Disobedient when given a command (Stay, wait, leave it)
If so, give examples. _____
- Reactive or aggressive towards other animals.
If so, give examples _____
- vocalizes inappropriately (barks, howls, and whines).
If so, give specific examples _____
- I consider my dog to be over active and/or requires too much attention.
If so, give examples _____

Commands known and performed regularly:

Other Behavior Concerns:

Training Summary (Trainer Use):

Commands:

Behavior Modification:

Attended Daycare Comments: _____

Handouts/instructions sent with client: _____

I, _____ understand that because my dog _____ is undergoing behavior modification for having aggression towards people, children or other dogs and that he is still an animal and should never be trusted one hundred percent to not react on his instincts. Even though my pet is undergoing training, I should still use extreme caution during any interaction my dog might have. All of my questions regarding the expectations of behavior modification have been discussed with the trainer and are understood.

Owner or Agent for Pet's Signature: _____ Date: _____