

**In consideration of my pet(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being permitted to be a pet guest at K9 Care Camp, by signing this document, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Owner/Guardian make the following representations, certify the accuracy of all information provided to K9 Care Camp, L.L.C. at any time, and agree to all of the following policies, procedures, terms and conditions stated below in the K9 Care Camp, L.L.C. boarding and Services Agreement. I understand that K9 Care Camp, L.L.C. reserves the right to deny admittance to any pet for any reason at any time.**

**Policies, Procedures, Terms and Conditions**

**I represent myself and my pet(s) meet the following requirements;** 1) Is four months of age or older.
2) Is current on his or her vaccinations.
3) Is on a monthly flea and tick preventative.
4) Has been in good health for the past 30 days prior to check-in.
5) Is not aggressive or toy protective.
6) I have completed the Dog and/or Cat profile.
7) My dog will enter and exit the K9 Care Camp Facility on leash.
8) My Cat will enter and exit the K9 Care Camp facility in a cat carrier.

**Health and Veterinary Care;**

1) I represent that my pet has not had any contagious illness of any kind for 30 days prior to check-in.
2) I agree to assume all risks associated with the administration of medications during my pet’s stay at K9 Care Camp.
3) I am aware and understand that K9 Care Camp employees are not veterinarians and therefore not experts in animal medicine.
4) I agree to allow K9 Care Camp employees to obtain veterinary medical treatment if they deem the pet to be ill, injured or exhibiting any other behavior that may suggest your pet needs medical treatment. I give K9 Care Camp, L.L.C. and its employees full authority to make decisions involving medical treatment of my pet during its stay at K9 Care Camp. I agree I am fully responsible for the cost.

**Financial;**

1. Owner agrees that the pet shall not leave K9 Care Camp, L.L.C. until all charges are paid by the owner including charges for special services and any and all veterinary costs incurred by the pet.

I understand that it is possible for dogs to sustain injuries causing permanent damage and even resulting in death while being boarded at K9 Care Camp, L.L.C.. I will not hold K9 Care Camp, L.L.C. responsible in any way should my dog become ill, get injured or die while in the care of K9 Care Camp. I understand that when this contract refers to K9 Care Camp it includes Jean Stephens or any person, property or device owned by, being used by or associated with K9 Care Camp.

K9 Care Camp Representative\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_

K9 Care Camp, L.L.C.
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