

## WAIVER FORM FOR DOG WALKING & HOUSE SITTING

I understand that, despite **Waggly Walks** best efforts to maintain the safety of every dog or pet, there are certain risks involved in dog walking, activities with pet and/or pet sitting. I understand and assume all related risks both known or unknown to me, of my participation in this service. I voluntarily accept the risks, and release **Waggly Walks** from any and all claims arising out of injury or damage in any way, including but not limited to, claims of injuries to my dog (or pet), myself or to any property that belong to me. I further understand that due to the way that dogs interact with one another, minor cuts and scratches can occur even though the dog (or pet) are carefully supervised at all times. I understand and agree that dogs (or pet) can be unpredictable. While my dog (or pet) is in the care and custody of **Waggly Walks**, if I am unreachable in the event of an emergency, I hereby authorize **Waggly Walks** to seek immediate veterinary care for my dog/pet. I agree to be financially responsible for any and all costs in connection with, veterinary, medical or other treatment. I am aware and understand that I should carry my own pet insurance.

I represent that my dog (or pet) is currently in good health and has not had any communicable illness of any kind for 3 weeks prior to attending dog walking and/or pet sitting with **Waggly Walks**. I further represent that each time I left my dog (or pet) into the care of **Waggly Walks** I am re-certifying that my dog is in good health and has not had any communicable illness of any kind for 3 weeks prior to such dog walking, activities and/or pet sitting. I further represent that I had advise **Waggly Walks** of any particularities about my dog (or pet) such as: habit to chases others animals, any behavioral concerns or issues (phobia, guarding behavior, anxiety, ...), any restricted exercises by veterinarian (or others), any limited or impairs sensory functions, dietary specification, ... I represent and understand that I will be responsible for any information I didn't provide to **Waggly Walks** about my pet that can cause any injury to my dog (or pet), **Waggly Walks & its employees**, myself, others pets or other person.

I understand and agree that this release applies to future unknown or unsuspected claims. I also acknowledge that **Waggly Walks** has a 24-hour cancellation policy for dog walking & drop-in and a 72-hour cancellation policy for House Sitting as standard operating policies for all its clients. Cancellation for dog walking/drop-in with less then 24 hour notice will be charged at full price & cancellation for House sitting with less then 72 hour will be charged a 3 night stay fee.

I understand and agree that **Waggly Walks** can refuse services in circumstance where providing services would be against **Waggly Walks** Insurance Policy instruction.

I warrant that I am at least 18 years of age and that I have the full, complete and unrestricted right and authority to enter into this release.

I \_\_\_\_\_as the legal owner of the dog/pet, having carefully read and fully understand this waiver and release from any and all liability of any nature. This includes any injury,

damages, claims loss, death, sickness my dog (or pet) may suffer during or after any walk, activities and/or pet sitting.

I release, waive, discharge, indemnify and agree to hold **Waggly Walks** harmless for any and all manner of damages, injury, claims loss, liabilities, costs or expenses, attorney's fees, causes of action or suit, whatsoever in law or equity, arising out of or related to the services provided by **Waggly Walks**.

DATE:	
DOG (OR PET) NAME:	
SIGNATURE OF THE OWNER:	
PRINT NAME OF THE OWNER:	
WALKER OR SITTER SIGNATURE:	list to

WALKER OR SITTER PRINT NAME: Clint Jefferies & Annik Patenaude

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