

## A DOG'S LIFE

### Client Engagement Contract

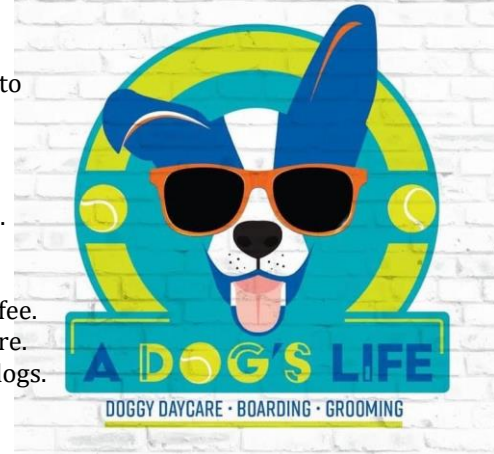
The following information and guidelines represent those aspects of the Company and Client relationship. Rules and parameters may change at any time and reasonable notice will be given to Clients.

#### Enrollment Qualifications:

All clients must fulfill the following prerequisites for daycare admittance in order to arrange a preliminary meet & greet.

#### Daily Play Groups:

- ✓ Dogs must have completed the required registration process, (see below).
- ✓ Play group hours are from 8AM-5PM, Monday-Friday.
- ✓ Full-day care costs \$25.
- ✓ Early drop-off and/or late pick-up options are available for an additional fee.
- ✓ All dogs must come for a meet and greet/trial day before attending daycare.
- ✓ Clients must give advance notice before dropping off or picking up their dogs.



#### Boarding:

- ✓ \$35 per day
- ✓ Dogs must be picked up/dropped off NO EARLIER THAN 7AM and NO LATER THAN 6PM.
- ✓ All food and supplies are to be supplied by the owner.
- ✓ Additional charges may apply for special needs.
- ✓ Specific drop-off and pick-up times, as well as any prescriptions or dietary instructions must be provided.
- ✓ While not a traditional kennel, crated bedtime can be provided if you and your dog prefer.
- ✓ All dogs must come for a meet and greet/trial night before boarding.
- ✓ Client must give advance notice before picking up or dropping off dogs.

#### Required Current Vaccinations and Health Measures:

(It is the Clients responsibility to update their pet's records with A Dog's Life. Pets with lapsed vaccinations may be precluded from participation and boarding)

- ✓ Bordetella (Yearly, must have been administered at least 11 days prior to acceptance)
- ✓ Heartworm Preventative
- ✓ Flea & Tick Protection
- ✓ Rabies
- ✓ DHPP (distemper, hepatitis, parvovirus, parainfluenza)
- ✓ Neutered/spayed by 6 months of age
- ✓ Negative fecal test (within last 6 months)

#### Recommended Vaccines and Health Measures

- ✓ Lyme Vaccine
- ✓ Influenza Vaccine
- ✓ Leptospirosis

#### Behavioral and Temperament Guidelines:

- ✓ Your pet will be assessed by owner for group compatibility.  
A Dog's Life will routinely assess individual pet behavior. Changes in pet behavior will be reported to Client in a timely fashion.
- ✓ Full disclosure of dog's past behavior is required to ensure safety and happiness of all daycare clients. Clients will update A Dog's Life of any behavior changes in their pet. Failure to do so may impute liability directly to Client.



- ✓ Dog has not harmed or shown any aggressive or threatening behavior towards any person or another dog.
- ✓ Dog is not aggressively protective of food and toys.
- ✓ All dog clients must be at least 4 months of age.
- ✓ All Bristol clients must have a town license for their dog.

**A Dog's Life will NOT accept the following:**

- ✓ Dogs that have terminal illness and are in the late stages of that illness.
- ✓ Dogs that have had or have been exposed to any communicable illness of any kind during the 30 days prior to acceptance.

**Emergency Situations:**

A Dog's Life seeks to provide a safe, secure, and enjoyable environment for your pet. If an emergency situation arises involving your pet, A Dog's Life employees will utilize their trained and professional opinion on how to handle the matter. Every effort will be made to contact a Client before taking any action with the Client's pet. If needed, A Dog's Life will make every effort to engage the Client's veterinarian (listed below) for consultor services. If the context does not allow use of Client's veterinarian, Client authorizes A Dog's Life to use the most readily available veterinarian services and Client assumes liability for emergency services and payment.

**Owner Information:**

(Please list all parents)

\_\_\_\_\_

\_\_\_\_\_

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

Contact Phone# \_\_\_\_\_

Email Address: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

**Pet Information:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Breed: \_\_\_\_\_ Biting History: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

Feeding Instructions: \_\_\_\_\_

Medication Instructions: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Fears/Sensitivities/additional "Quirks": \_\_\_\_\_

I, \_\_\_\_\_, certify that I have read and agree to the above requirements. I authorize Matt Dame/A Dog's Life to act as my agent in the event that my dog needs immediate medical attention. I further agree that I will be responsible for all costs of any veterinary care deemed absolutely necessary by the licensed veterinarian. I release and indemnify A Dog's Life of all liability for my pet's behavior and accept all reasonable liability for such.

**Signature:**

**Date:**

