Priority Pet Boarding Services Inc. Liability and Consent Waiver

NOTICE TO THE PET OWNER/GUARDIAN: PLEASE READ CAREFULLY. THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO Wyatt Adam (referred to in this agreement as “Priority Pet Boarding Services Inc.”), AND RELATED PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY AND UNDERSTAND ITS EFFECT, POLICIES, PROCEDURES, PET RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNIFICATION AGREEMENTS.

In consideration for my pet(s)\_\_\_\_\_\_\_\_\_\_\_\_

being permitted to be a pet guest with  Priority Pet Boarding Services Inc, by signing this document, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner/Guardian, make the following representations, certify the accuracy of all information provided to Priority Pet Boarding Services Inc, at any time, and agree to all the following policies, procedures, terms and conditions stated below in this Priority Pets Service  Agreement, Policies, Procedures, Terms and Conditions.

Client’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

StreetAddress:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Code:**.** Home Phone:

Business/Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone/Pager:

E‐mail Address:

Emergency Contacts: They should be able to make a decision about the care of your pets if we cannot reach you in case of an emergency.

Name:

Relation

Phone:

Name:

Relation: Phone:

**Cat Profile**

Does your cat have up‐to‐date vaccinations? Please email vaccination records Rabies, FVRCP and pertinent medical records to prioritypets1986@gmail.com. If you have pet insurance, please provide information here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breed \_\_Both cat short hair. Age/DOB- Kiwi is a 3-year-old female spayed, and menou is a 5-year-old male neuter

Male / Female /  Spayed / Neutered:

yes/no      Microchipped:       yes/no

Color(s) / Distinguishing features –

Favorite toys/games

Food allergies/restricted foods N/A

Major medical conditions N/A \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medications (name, dosage, frequency) N/A \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your cat ever shown signs of aggression towards a person or other animals   yes/no (hackles, growls, lunges, air snaps, contact, bites)    Explain if YES?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chases cats, dogs, squirrels, etc.  yes/no

Animal darts through an opening door       yes/no

Any behavioral concerns or issues (resource guarding behaviors, storm phobias, noise phobias, separation anxiety, sibling rivalry, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any restricted exercise by veterinarian

Any limited or impaired sensory functions (deaf/blind)

**Veterinary Information**

If your pet becomes injured or ill, Priority Pet Boarding Services Inc, is hereby authorized to take your pet to the nearest animal care facility and such expense shall be paid by the owner of the pet. Name of hospital \_\_\_ Bank Street Animal Hospital

Preferred Doctor\_\_ Address-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone-

Please indicate the dates you are requesting pet sitting services.

SITTING SERVICE Start date: ending date: Approximate Pick up time:

The Pet Owner agrees to the following terms and conditions: The Pet Owner agrees to provide Priority Pet Boarding Services Inc, with all necessary instructions for their pet’s requirements while under their care. The Pet Owner will provide any medication or special needs instructions for each of the pets. The Pet Owner will be considered liable for any damages or injuries caused by the pets while under the care of Priority Pet Boarding Services Inc. Priority Pet Boarding Services Inc. Agrees to the following terms and conditions: Priority Pet Boarding Services Inc, will perform the duties listed by the Pet Owner to the best of {his/her} abilities, in a reliable and caring manner. Priority Pets Services will keep secure any personal information and return them at the end of the contracted service date. Priority Pets Services will supply and be equipped with a pooper scooper and disposable waste bags. Priority Pets Services will not be liable for any injuries to the cat that are caused by animals or people outside of Priority Pets Services control. Priority Pets Services will not be liable for any incident that occurs during transportation of the cat to a vet, kennel, or clinic.

**Pet Boarding/Sitting Service Agreement**

Pet Requirements I represent that my pet meets all the following requirements: is current on his/her required vaccinations has been in good health for the last 30 days. REQUIRED VACCINES FOR COMMUNAL CAT BOARDING RABIES AND FVRCP. RECOMMENDS FELINE LEUKEMIA BUT IS NOT MANDATORY. Only in door cats are permitted to socialize with other felines for the health and safety of our guests. Cats who are in door and outdoors are going to receive private cat boarding services. I attest that my pet is not aggressive or toy protective.

1. HEALTH. I represent that my pet has not had any contagious illnesses of any kind for 30 days prior to check‐in. I am aware and understand that Priority Pet Boarding Services Inc employees are not veterinarians and do not have backgrounds in animal medicine. Priority Pet Boarding Services Inc, employees cannot diagnose or detect illnesses in the pets that are staying at Priority Pets Services I agree to assume all risk associated with the administration of medication by Priority Pets Services during my pet’s stay. In addition, I acknowledge and am aware that vaccines do not protect against all contagious illnesses that may affect my pet. I HEREBY AGREE TO INDEMNIFY PRIORITY PETS SERVICES, ITS OWNERS, DIRECTORS, OFFICERS, EMPLOYEES AND AGENTS AGAINST ANY CLAIMS MADE AGAINST PRIORITY PET BOARDING SERVICES INC, ITS OWNERS, DIRECTORS, OFFICERS, EMPLOYEES, AND AGENTS AS A RESULT OF MY FAILURE TO INFORM PRIORITY PET BOARDING SERVICES INC, OF ANY PRE‐EXISTING MEDICAL CONDITIONS THAT MY PET MAY HAVE. I agree that if any fleas or ticks are discovered on my pet during check‐in or at any other time while my pet is receiving services from Priority Pets Services that Priority Pets Services may administer a flea bath and flea spot treatment at my expense.

2. Veterinarian Liability and Care. I agree to allow Priority Pets Services to obtain veterinarian medical treatment for my pet, if, in its sole discretion it appears that, the pet is ill, injured, or exhibits any other behavior that would reasonably suggest that my pet might need medical treatment. Medical treatment may require transportation of my pet to receive care and I hereby authorize such transportation. I grant Priority Pets Services full authority to make decisions involving the medical treatment of my pet during its stay at Priority Pet Boarding Services Inc. I agree that I am fully responsible for the cost of any such medical treatment and transportation. I agree that I am assuming all risk of illness, disease, harm or otherwise to my pet by allowing my pet to participate in services at Priority Pets Services. Furthermore, I agree that I am assuming all risk of the consequences associated with any decisions made by Priority Pets Services, relating to the medical care and transportation of my pet.

3. Transportation. I agree that if my pet is transported to or from Priority Pets Services by Priority Pets Services, its employees or agents that I AGREE TO HOLD PRIORITY PETS SERVICES, ITS OWNERS, DIRECTORS, OFFICERS, EMPLOYEES, OR AGENTS HARMLESS IN THE EVENT OF INJURY OR ACCIDENT DURING TRANSPORTATION.

4. Pet Behavior. I agree to be solely financially responsible for any and all acts or behavior of my pet while in the care of Priority Pets Services, WHICH MAY INCLUDE PAYMENT OF DAMAGES FOR THE INJURY CAUSED BY MY PET TO OTHER ANIMALS, HUMANS, AND/OR PRIORITY PETS PET SERVICES. IN ADDITION, I AGREE THAT IF MY PET IS INJURED BY ANOTHER PET, I HEREBY RELEASE PRIORITY PET BOARDING SERVICES INC, ITS OWNERS, EMPLOYEES, AND AGENTS FROM ALL LIABILTY AND FINANCIAL RESPONSIBILITY FOR SUCH INJURY. I FURTHER UNDERSTAND THAT IF MY PET BITES A HUMAN OR PET, THAT PRIORITY PETS SERVICES MAY CONTACT THE APPROPRIATE AUTHORITIES. I understand that Priority Pets Services is a cage‐free facility utilizing a house where other cats interact. I understand that cats can play with their mouth and paws, which can result in nicks and scratches on my pet. While Priority Pets Services provides reasonable care and supervision in the house and playgroups, I understand and agree that Priority Pets Services employees may not notice these nicks or scratches before my pet’s departure and, therefore, I might not be notified.

5. Aggressive Cats. I certify that my cat is not aggressive, and I understand that aggressive cats are not permitted to participate in communal boarding services at Priority Pets. If my cat acts aggressively or exhibits unacceptable behavior, he/she may be separated from the other cats. I authorize Priority Pets Services to use squirt bottles for the protection of other pet guests and humans.

8. Abandonment Notice. I fully understand and agree that if my pet is not picked up by myself or an authorized representative within 14 calendar days after the day my pet is scheduled to depart, that my pet shall be deemed “abandoned”. I understand if I abandon my pet at Priority Pets Services, Priority Pet Services, in its sole discretion, will try to re‐home my pet, or relinquish my pet to a legal shelter of its choice. I FULLY UNDERSTAND AND AGREE THAT IF I ABANDON MY PET AT PRIORITY PETS SERVICES, I MAY BE UNABLE TO RETRIEVE MY PET AND WILL HAVE NO RECOURSE AGAINST PRIORITY PETS SERVICES. In addition, I understand that I will still be responsible for the unpaid charges incurred for my pet’s stay.

7. Photo and Video Release. I agree to allow Priority Pet Boarding Services Inc to use my pet’s name and any images or videos taken while he/she is in the care of Priority Pet Boarding Services Inc, in any form or format, for use, at any time, in any media, marketing, advertising, illustration, trade or promotional materials.

8. Personal Property. I agree that Priority Pet Boarding Services Inc, shall not be responsible or liable for any lost, stolen, or damaged personal property belonging either to my cat or me.

9. Check‐in & Check‐out Times. I understand that checking in before 7:00 a.m. incurs an additional service fee Check‐out time is 2:00 p.m. I understand checking my pet out after 2:00 p.m. will be charged an additional service fee of $25.00.

10. Duty to Disclose. I represent that I have disclosed and shall continue to disclose, any and all medical conditions or any other conditions, including, but not limited to, personality concerns or behaviors that may affect, limit, or prevent my pet’s ability to participate in services provided by Priority Pets Services. I understand that Priority Pets Services is relying on and will rely on those representations to provide a safe environment for both humans and animals.

11. WAIVER OF RELEASE AND INDEMNIFICATION.   I RELEASE, WAIVE, DISCHARGE, INDEMNIFY AND AGREE TO HOLD PRIORITY PETS SERVICES, ITS OWNERS, DIRECTORS, OFFICERS, EMPLOYEES AND AGENTS HARMLESS FOR ANY AND ALL MANNER OF DAMAGES, INJURY, CLAIMS, LOSS, LIABILTIES, 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 PRIORITY PET BOARDING SERVICES INC, ITS OWNERS, DIRECTORS, OFFICERS, EMPLOYEES OR AGENTS INCLUDING WITHOUT LIMITATION: ANY INACCURACY IN ANY STATEMENT MADE BY MYSELF OR INFORMATION PROVIDED BY ME TO PRIORITY PETS SERVICES, MY PET, INCLUDING BUT NOT LIMITED TO DISTRUCTION OF PROPERTY, CAT BITES, INJURY, AND TRANSMISSION OF DISEASE, AND ANY ACTION BY MYSELF THAT IS IN BREACH OF THE TERMS OF THIS AGREEMENT.

12. Sole Agreement. This writing represents the sole agreement between Priority Pet boarding Services Inc, and the Owner/Guardian.

13. Affirmation. Each time I bring my pet into Priority Pet Boarding Services Inc, I am re‐affirming the terms of this agreement, and the truthfulness and accuracy of all the statements I have made in this agreement. I HAVE READ AND FULLY UNDERSTAND THE TERMS OF THIS AGREEMENT AND UNDERSTAND THAT I WILL GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED THIS AGREEMENT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY Priority pets services. OFFICERS, EMPLOYEES AND AGENTS TO THE GREATEST EXTENT PREMITTED BY LAW. I FURTHER AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID OR UNENFORCEABLE, THE REMAINDER OF THIS AGREEMENT SHALL REMAIN IN FULL FORCE AND EFFECT.

14. Any violation of the aforementioned terms will be considered a breach of contract. The agreement is listed above in its entirety.

Signature of Owner/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Priority Pets Services:          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_