

RELEASE, WAIVER OF LIABILITY AND INDEMNIFICATION

I, _____, execute this Release, Waiver of Liability and Indemnification (the "Release") in favor of LUCKYDOG DAY AND NIGHT CARE, LLC, an Oregon limited liability company, its directors, officers, employees and agents (collectively "LUCKYDOG"). I understand and agree that in admitting my dog(s), LUCKYDOG has relied upon my representation that my dog(s) is in good health and has not harmed or shown aggressive behavior towards any person or any other dog.

I understand that while LUCKYDOG carefully screens all applications, reviews each dog's health and vaccination history, and monitors each dog's behavior in order to provide quality care and service, dog behavior can be unpredictable and certain illnesses not readily apparent. Accordingly, I hereby release LUCKYDOG from any and all liability, claims and demands of whatever kind or nature which arise or may hereafter arise from my dog's attendance at LUCKYDOG. I understand that this Release discharges LUCKYDOG from any liability or claim that I may have against LUCKYDOG with respect to any injury, illness, or death, either to myself or my dog(s) that may result from my or my dog(s)' presence or attendance at LUCKYDOG. Furthermore, I will defend, indemnify and hold LUCKYDOG harmless from any claim in relation to my or my dog(s)' involvement with LUCKYDOG that may be filed against LUCKYDOG.

I also agree to repair or replace any and all equipment damaged by my dog while my dog is attending LUCKYDOG. LUCKYDOG shall notify me promptly upon discovery of any such damage.

I understand that while LUCKYDOG does its best to provide quality care, it is not necessarily the appropriate environment for every dog. Accordingly, I understand that LUCKYDOG reserves the right to permanently remove a dog from daycare at any time.

I certify that I have read and understand the rules and regulations set forth on the preceding page and this Release. I agree to abide by the rules and regulations, and accept all terms, conditions, and statements of this Release.

DATE: _____

Owner: _____
(signature)

Printed Name: _____

DATE: _____

Owner: _____
(signature)

Printed Name: _____

Phone: _____

Veterinary Treatment.

I understand that LUCKYDOG is committed to creating a safe, healthy and caring environment for my dog. In the event, my dog needs any medical care or attention while my dog is attending LUCKYDOG, I authorize LUCKYDOG to arrange for such care if they are unable to reach me for whatever reason. I understand that I will be responsible for all costs in connection with my dog, including transportation, veterinary, medical, and otherwise. Below is my credit card information to be used expressly for such purposes.

DATE: _____ Owner: _____
(signature)

Name as Printed on Card: _____

Credit Card Information:

(Credit card Number)

(Expiration Date)