

Owner Liability Waiver and Health Certification

I,, hereby certify that my dog(s):	is/are in good						
health and has/have not been ill with any communicable condition in the la							
certify that my dog(s) has/have not harmed or shown aggressive or th	reatening behavior						
towards any person or any other dog. I also understand that every dog re-	acts differently and						
that animals by nature are unpredictable. Dogs and animals may bite or ca	use other injury to						
humans and other dogs without warning or reason. The undersigned, b	y execution of this						
document, agrees that he, she or they shall indemnify and defend Woof!	Orlando and their						
owners officers, employees, and agents and hold each of them harmle	ss from any claim,						
demands, causes of actions or damages, including reasonable attorneys fee	s, arising out of any						
action or damage or injury done by their dog to any individual or individuals	while in the care of						
Woof! Orlando. I acknowledge and understand that there are certain risks in	nvolved in day care,						
overnight boarding, grooming and pet sitting/dog walking, including but	not limited to dog						
fights, dog bites to humans or other dogs, and the transmission of dis	sease. Any medical						
expenses will be my responsibility and I release Woof! Orlando of any cha	arges. I understand						
that dogs not familiar with Woof Orlando may experience separation anxie	ty when apart from						
their owner (s), and dogs unaccustomed to the level of activity at days	are may have sore						
muscles, joints, and fatigue. Dogs not regularly socialized do not necess	arily know how to						
behave politely with other dogs. These dogs are at a higher risk of incidents including but not							
limited to bites, fights, fear aggression, object guarding, and/or acting out.							
1. I,(initial) understand that I am solely responsible for any h	arm caused by my						
dog(s) while my dog(s) is/are attending Woof! Orlando Playcare/ overnight by	oarding, grooming,						
or pet-sitting/dog walking.							
2. I, further understand and agree that in admitting my dog(s							
Playcare/ overnight boarding, the staff has relied on my representation that	my dog(s) is/are in						
good health and has/have not harmed or shown aggressive or threatening	_						
any person or any other dog. The Woof! Orlando staff may at any time r	_						
playcare if he/she exhibits behavior which could be harmful to other dogs or	staff.						



diligence and reas problems that may	sonable care while caring for m	Woof! Orlando and its staffwill exercity pet, and will notbe held liable lando ofany liability of any kind wha	for any
scratches at dayca a Woof! Orlando College Park and a unreachable, Woo	re. If a dog becomes otherwise ill o staff member will transport the attempt to reach the owner whil	dogs can sometimes receive minor continuities and is in need of immedial animal to Dr. Olsen, at Varsity Vet of the animal is in transit. If the organian proceed with any treatment oblity for veterinary treatment.	ite care, Clinic in wner is
forth on the Gene conditions and sta neutered, on a fle	ral Information and Policies sheet tements of this agreement, includ a/tick preventative program, and includes the booster) and bord	stand the policies of Woof! Orlando ts and that I have read and understa ding the following:Dog(s) must be sp up-to-date on DHLPP, H3N2, rabies datella in order to attend Woof! (and the ayed or s, H3N2
including, but not Woof! Orlando, its bacterial infection, Olsen at Varsity Veup immediately b	limited to tracheobroncitis and partial staff suspects my pet to be carrying I give permission to Woof! Orland to Clinic in College Park. I also under the emergency contact I provided the contact I provided	my dog attending Woof! Playcare/Bouppy warts. If, while boarding my ing or have contracted a contagious do to provide medical treatmentthro derstand that my dog will need to be vide. We understand Woof! Orlan me all financial responsibility for veto	dog at virus or bugh Dr. e picked
Signature Owner(s		 	



Playcare, Boarding, & Dog Walking Application

Dog Owner I	ntormation			
Name				
Address				
City		State	Zip	
Work phone		Home phone	2	
Cell Phone				
Email address _				
•	Contact Information			
Phone Number		**This Per	son will need to pick up your pet in	the
case of an eme				
·	additional persons who a	are permitted to pick up yo	our dog(s)	
Dog Informa				
Name		Breed		
Weight	Color	Age	Birthday	
Male Neutored	· Ves No	Famala Snavad: Vas	No	

407-422-2206



Dog Information: Pet 2 Name______ Breed_____ Weight _____ Color ____ Age ____ Birthday _____ Male Neutered: Yes ____ No ___ Female Spayed: Yes ____ No ___ **Dog Information: Pet 3** Name______ Breed_____ Weight _____ Color____ Age____ Birthday_____ Male Neutered: Yes ____ No ___ Female Spayed: Yes ____ No ___ **Dog Information: Pet 4** Name______ Breed______ Weight _____ Color ____ Age ____ Birthday _____ Male Neutered: Yes ____ No ___ Female Spayed: Yes ____ No ___ **Health Information:** Vet Name/Clinic Address Phone Number _____ Fax Number _____ List any allergies or medical conditions What form of flea & tick control do you use?_____ Is your dog permitted to have good, healthy treats?Yes _____ No _____

407-422-2206

Please list any special instructions for your dog______



Getting To Know Your Dog

Our goal at Woof! Orlando is to provide a safe environment for all of our guests. Therefore, it is very important to answer these questions honestly for the safety of your dog, other dogs and the staff.

Multi-pets: Please specify or differentiate by pets' initial.
Has your dog been to any other daycare facility, dog parks, groomer, boarding kennel or vets
office in the last 14 days?
Does your dog every cough or have discharge from eyes or nose? Y or N
How does your dog react when meeting new dogs?
What behavior does your dog display with other dogs in a group setting such as dog parks or play groups?
Does your dog have a strong prey drive? Yes No
Has your dog ever bitten another dog? Yes No
Has your dog ever shown aggression towards small dogs? Yes No
Has your dog ever shown aggression towards large dogs? Yes No
Has your dog ever harmed another dog in any way? Yes No If Yes, how?
Does your dog mount other dogs? Yes No
Does your dog enjoy playing with dogs with similar play styles? Yes No
Does your dog prefer to be off on his own/her own? Yes No
Is your dog food possessive? Yes No
Is your dog toy possessive? Yes No





Does your dog "pee" mark inside? Yes No
Is your dog easily excitable? Yes No
Does your dog pee when excited? Yes No
Does your dog have separation anxiety? Yes No
Is your dog shy? Yes No
Does your dog bark when he plays? Yes No
Does your dog bark excessively?Yes No
Is your dog destructive to toys and other objects? Yes No
Is your dog destructive to furniture? Yes No
Is your dog crate trained? Yes No
Does your dog eat bad things (i.e. poop, tennis balls)? Yes No
Has your dog ever bitten an adult or child? Yes No
Has your dog ever shown aggression towards adults or children? Yes No
Has your dog ever harmed an adult or child in any way? Yes No
Does your dog come when called?Yes No
Does your dog jump fences? Yes No If yes, how high?
Is your dog obedience trained?Yes No If yes, what commands?



Anything else we should know?

Rules & Regulations

- 🍟 All dogs must be on a leash when arriving and leaving the facility and must have a nylon, cloth or leather collar on while in daycare. NO choke chains or prong collars are allowed while in Playcare.
- 🤏 If pet is not picked up by 6:30 p.m. sharp, he/she will spend the night and be charged the normal boarding rate.
- 🚏 Any meals or medications must be supplied by the dog owner. Please place them in a plastic bag or container with their name (first and last name) on the outside and be sure to give special instructions in writing attached to the container.
- 🥞 Pets must be at least 16 weeks, and dogs older than 7 months must be spayed or neutered to attend Playcare or stay overnight.
- 🥞 Only socialized dogsare allowed to participate in playcare. Any signs of aggression toward another dog or person will terminate their Playcare privileges.
- 🍍 All dogs will be checked for flea infestation. Woof! Orlando reserves the right to give each dog found to have fleas a bath and/or a CAPSTAR™ tablet, and/or topical liquid flea preventative. Dog owner(s) will be responsible for paying full retail price for the bath and flea preventative. Dogs attending Playcare and boarding are required to be on a monthly flea control program.
- 🤻 Proof of Rabies, DHLPP, Canine Influenza Vaccine plus booster and Bordetella vaccinations are required and must remain current, unless your dog is under the care of a holistic veterinarian. All vaccines must be administered at least 14 days before the boarding or daycare reservation.
- 🍟 A 25% deposit is required at the time of reservation on non-holidays, 50% for holiday reservations. The balance is due at time of pick-up. In case of cancellation an in- store credit for the deposit will be issued for future boarding or daycare reservations only. Cancellations must be received at least 48 hours prior to the scheduled drop-off time for non-holiday reservations and 72 hours in advance of Holiday reservations. Prepaid daycare packages may not be used toward for boarding reservations.



Veterinary Treatment Consent Form

4	l, ur	nderstand the risk	s associated v	vith my dog att	ending Woof
	Playcare/Boarding including	out not limited to	o tracheobron	citis and canine	influenza. If
	while my dog is boarding at '	Woof! Orlando, th	e staff suspect	ts my pet to be	carrying or to
	have contracted a contagious	virus or bacterial	infection, I give	permission to V	Voof! Orlando
	to transport my pet for medic	al treatment thro	ugh Dr. Elizabe	th Olsen at Varsi	ty Vet Clinic ir
	College Park.*If Dr. Olson is	closed we may tr	ansport pet to	any Emergency	/ Vet Clinic ir
	Central florida.I agree to ass	ume financial res	ponsibility for	all veterinary t	reatment and
	expenses.We understand W	oof! Orlando wil	I attempt to	notify us in a	dvance.In the
	unfortunate event my dog is f	ound to have trach	neobronchitis or	canine influenza	ı, I understand
	he/she will be removed from	daycare immediat	ely. I will pick	up my pet imn	nediately upor
	notification of my pet being ill,				
	dog can return when treatment	•	•		_
	to have or suspected to				•
	infectious/contagious disease or			•	•
	or approved caretaker must pick	•	•	_	
	staff suspects a pet to be				
	infection, Woof! Orlando will	-			_
	at Varsity Vet Clinic in College		•	•	
	Owners will assume all/full fir	ancial responsibili	ty for veterina	ry treatment reg	ardless of the
	illness.				
l c	ertify that the above information	and answers are acc	curate and true t	to the best of my k	nowledge.
Się	gnature Owner(s)			Date	



Emergency Contact Policy

Each specific boarding reservation in our facility requires an emergency contact who is prepared to pick up your pet/(s) in the case of an emergency. An emergency is a pet illness or any situation deemed an emergency by Woof! Orlando Inc.

We will need to make contact with your emergency contact 72-hours prior to all scheduled boarding reservations. If we try and cannot make contact you're your emergency pick up contact we will cancel reservation and withhold deposit after 24 hrs. of attempting to contact and confirm they are aware and available to pick up your pet(s) in the event we deem it necessary for them to do so.

Woof Orlando Inc. is not a hospital/veterinary facility or hurricane shelter. In the event of an emergency it is imperative that your emergency contact is available to pick up your pets immediately.

	nergency contact.			
	1	Phone Numbe	·	
This person will be picking up your dog immediately in the event of an emerg Woof! Orlando deems as necessary.				
Ву	signing below, yo	ou understand and agree to our emerger	icy contact policy	
Da	ate:	Sign		
		Print		

Emorgonov contact:



Canine Influenza Virus Waiver

CIV (Canine Influenza Virus) is currently spreading in our community. By signing this waiver you understand and accept full responsibility for the risks associated with your dog being in a building with other dogs. You also fully understand and accept all responsibility for the cost of treatment if your pet contracts CIV. You also understand CIV vaccines do not fully protect your pet from the virus. If your pet is suspected to have CIV we require immediate pick up of your pet since this virus spreads extremely fast.

Sign name	 	 	
Print Name			
Date			