

**College Road Animal Hospital Doggie Daycare
Authorization for Veterinary Care
Agreement for Release and Waiver of Liability**

I understand that attendance by my dog(s) at College Road Animal Hospital Doggie Daycare involves group play with other dogs. Although the staff will closely supervise all participants, I accept that play behavior or participation in routine daily activities can lead to altercations and/or injuries. I assume the risks of and responsibility for the costs to treat any injuries my dog(s) sustain while playing at this facility. I further understand and accept that the owners and staff will not be held liable for any injuries or deaths related to my dogs' participation.

I understand that in the event my dog(s) should become ill or injured while in the care of College Road Animal Hospital Doggie Daycare I will not be provided with any names of other dogs involved and/or any owner information.

In the event that my dog(s) become ill or injured during their participation in College Road Animal Hospital Doggie Daycare I understand that every effort will be made to reach me and/or my emergency contact. However, if unable to be reached, I give full permission for College Road Animal Hospital doctors and staff to make any needed decision concerning medical treatment and give my full consent to treat as they deem necessary. I hereby consent and authorize any and all emergency care and will assume full responsibility for all costs associated with such treatment.

In the event that my dog(s) contract a communicable disease during their time attending College Road Animal Hospital Doggie Daycare, I accept responsibility for the costs of any and all treatments. Although the risk of acquiring communicable diseases is small, I accept the risk and take full responsibility for any expenses incurred for treatment.

I have read this authorization, release of liability and assumption of risk agreement, fully understand its terms and sign it freely and voluntarily.

Owners Name (please print) _____ Date _____

Owners Signature _____ Dog's Name _____

Emergency Contact: _____ Phone: _____

The following people have permission to pick up my dog(s):

1. _____
2. _____
3. _____
4. _____