



Paws Abilities
Dog Training
Helping people enjoy their dogs.

Paws Abilities Dog Training Puppy Camp Service Contract

Client & Dog Information

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| Guardian's Name: | Referred By: |
| Home Phone: | Work Phone: |
| Cell Phone: | Email: |
| Address: | |
| Puppy's Name: | Breed/Age/Sex: |
| My dog is friendly to people and other animals: <input type="checkbox"/> Yes <input type="checkbox"/> No | My dog is good in a crate: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is it okay to share pictures or videos of your dog's training process online? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Emergency & Health Information

| | |
|----------------------------------|----------------------------|
| Emergency Contact: | Emergency Contact's Phone: |
| Vet Office/ Vet's Name: | Vet's Phone: |
| Vet's Address: | |
| Directions to Vet's Office: | |
| Current Medications: | Reason(s) for Meds: |
| Important Medical History Notes: | |

Feeding Instructions

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|-------------------------------|---|
| Puppy's Regular Food (brand): | Amount Given / Times of Day: |
| Dog's Regular Treats: | |
| Treat/Dietary Restrictions: | Other treats okay? <input type="checkbox"/> Yes <input type="checkbox"/> No |

Drop-off and Pick-up

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| Individuals authorized to pick up dog: |
| Preferred pick-up time (please rank these times from 1-5 for most-preferred to least-preferred): <input type="checkbox"/> 4pm <input type="checkbox"/> 4:15pm <input type="checkbox"/> 4:30pm <input type="checkbox"/> 4:45pm <input type="checkbox"/> 5pm <input type="checkbox"/> 5:15pm <input type="checkbox"/> 5:30pm <input type="checkbox"/> 5:45pm |

Description of Services

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|---|------------|
| Desired Program start date: | Total Due: |
| <input type="checkbox"/> Puppy Genius (4 weeks) <input type="checkbox"/> Puppy PhD (8 weeks) <input type="checkbox"/> Puppy Prodigy (12+ weeks) | |

Puppy Camp Service Contract, continued

Liability Waiver & Policies

1. Paws Abilities Dog Training, LLC ("Paws Abilities") will make commercially reasonable efforts to provide a safe environment for the training of my dog and will offer sound, safe, and responsible training, and post-training instructions. I understand that Paws Abilities cannot guarantee the skills my dog will learn through the Puppy Camp program, as successful completion of the program is dependent on my involvement in the training process, but that Paws Abilities will make reasonable endeavors to teach both my dog and myself all skills included in the program. I understand the inherent risks in owning a dog, including but not limited to the risk of dog bites to myself or others, and shall remain responsible for the actions of my dog at all times. I further agree to (a) defend, indemnify and hold harmless Paws Abilities (including its owners, agents, contractors, and insurers) against any claims, damages, expenses and/or costs (including attorneys' fees) arising out of or relating to (i) my dog's participation in the Puppy Camp program, or any other service provided by Paws Abilities, and (ii) my dog's actions as a result of following any training instructions provided by Paws Abilities, and (b) release Paws Abilities from any claims arising out of or relating to any injuries my dog may sustain through participation in the Puppy Camp program, except to the extent caused by the gross negligence or willful misconduct of Paws Abilities. I agree that, in the event of any action against Paws Abilities, my damages shall be limited to the amount of fees I paid for my dog's participation in the Puppy Camp program. Under no circumstances shall I be entitled to seek or recover any incidental, consequential, punitive or exemplary damages against Paws Abilities.

Initial:

2. I authorize emergency medical care to be provided for my dog by the above-named veterinarian, or an appropriate alternate to be determined by Paws Abilities in the event the my regular veterinarian is not available or that closer care is required. I will reimburse Paws Abilities for any charges related to emergency care.

I authorize Paws Abilities to administer or seek 1st aid and resuscitative care for my dog as determined appropriate by Paws Abilities and I agree to indemnify and hold harmless Paws Abilities for all and any results thereof.

I DO NOT authorize Paws Abilities to administer or seek 1st aid and resuscitative care for my dog as determined appropriate by Paws Abilities and I agree to indemnify and hold harmless Paws Abilities for all and any results thereof.

Initial:

3. Payment Policy: A 50% deposit is required to reserve your spot (we accept checks and PayPal), with the remaining 50% due on the first day of your dog's camp.

Initial:

4. Drop-off/Pick-up Policy: Drop-off is between the hours of 7:30-9:00am. Drop-off after 9:00am without prior consent will result in an additional charge of \$1.00 for each minute past 9:00am. Pick-up times are arranged prior to the start of your program, and changes to pick-up times must be approved in advance by the program director. Dogs not picked up by 6:00pm will be transported and kept at A Dog Spot or other comparable boarding facility at the dog owner's expense.

Initial:

5. Cancellation Policy: Cancellations received at least two weeks in advance will receive a full refund. Cancellations received less than two weeks in advance of your program start date will receive a refund only if your spot can be filled.

Initial:

This contract is validated by the signatures below in total and as approval for future services without additional written authorization.

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Dog Guardian (you)

Date

Trainer & Title

Date