

## Dogs participating in Group Play at VCA Family Pet Resort

In order to participate in Group Play each owner is required to read, initial, and sign the following.

**Please initial next to each line.**

\_\_\_\_\_ I understand I am electing for my dog to participate in Group Play. I understand that Group Play settings involve a certain amount of risk. We do evaluate new dogs before participating in Group Play and have an attendant with the dogs at all times. Most incidents happen very quickly and without warning.

\_\_\_\_\_ I understand that there is a possibility my dog could be injured OR injure another dog. (Example: bite wounds or scratches)

\_\_\_\_\_ I understand there is a certain amount of risk involved that my dog could be injured NOT due to another dog. (Example: leg sprain or torn cruciate ligaments)

\_\_\_\_\_ If my dog is part of an incident resulting in injury requiring medical treatment, I agree to partial financial responsibility. The total cost of medical treatment will be split evenly between the owners of all dogs involved. (Depending on the extent of the injury, or the sizes of the pets, estimated costs of wound repairs could range from \$300.00 to \$1000.00.)

\_\_\_\_\_ I also understand we do not disclose pet/owner information of the dogs involved in incidents and all matters are to be handled by management at VCA Wellington Animal Hospital and Family Pet Resort.

This contract will remain on file for your pet(s) and will expire one year from the date it was signed

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name (Print): \_\_\_\_\_ Pet(s) Name(s): \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_