

Precious Furs Pet Resort ~ Day Care Agreement

13 Lovett Road Oxford, MA Phone: 508-987-2927 ~ Fax: 508-987-9756

Owner _____

Pet(s) Name and any information you think may be helpful:

(This may include your pet's favorite game to play during his playtime, grooming instructions, or a description how you would like the Kennel Comforts you chose divided up.)

Emergency Contact: Name _____ Phone: _____

Who besides yourself is authorized to pick up your pet? _____

Vaccination Policy: For the health and safety of all the pets in our facility, the following vaccines must be up to date before they arrive. Pets who are not up to date will not be permitted to stay. We are able to have fecal tests run at an additional cost of \$40. Dogs: Rabies, Distemper, Kennel Cough, Leptospirosis, and a Negative fecal test within the past 6 months Cats: Rabies & Distemper Ferrets: Rabies

Pet Day Care Agreement

- I understand that Precious Furs Pet Resort, LLC, has relied upon my representation that my dog is in good health and has not injured or shown aggression or threatening behavior to any person or dog in admitting my dog for services at their facility.
- I further understand that there are risks and benefits associated with group socialization of dogs. I agree that the benefits outweigh the risks and that I accept the risk. I desire a socialized environment for my dog while attending services provided by Precious Furs Pet Resort, and while in their care. I understand that while the socialization and play is closely and carefully monitored by Precious Furs Pet Resort, staff to prevent injury, it is still possible that during the course of normal play my dog may receive minor nicks, scratches, or muscle strains, etc. from roughhousing with other dogs. Any injuries to my dog will be pointed out by staff upon pick-up.
- I further understand that I am solely responsible, financially or otherwise, for any harm or damage caused by my dog while my dog is attending any services provided by Precious Furs Pet Resort, LLC.
- This agreement is valid for one year from date signed below.

By signing this document, I am agreeing to the terms and conditions indicated above and included in the Owner Agreement, which is made an integral part of this contract. If you have any questions, comments, or concerns, please speak to a staff member. Thank you for your patronage!

Owner Signature _____ Date _____

Hours of Operation: Mon-Fri 7:30am-6:00pm Sat 8:00am-5:00pm

October through April: Sunday 2:00pm-5:00pm

April through October: Sunday Noon- 5:00pm

******Closed: New Year's Day, Easter, Memorial Day, July 4th, Labor Day, Thanksgiving, & Christmas******