



## Trial Familiarisation Session.

I agree that my dog has successfully undergone a trial familiarisation program with Applause 4 Paws, including resident dogs.

Name & sign:

Dogs name:

Date:

I understand that my dog will socialise with other dogs while in the care of Applause 4 Paws and I consent to this being acceptable.

I understand that in the case of emergencies and evacuation, my dog will be taken to; The Thrift, Mays Lane, Barnet. EN5 2AG.

Arrangements will be made for me to collect my dog from that address.

If I am unable to collect my dog that same day, I understand that my dog will be placed in a local kennel chosen by Applause 4 Paws. I the owner will be responsible for the cost of this kennelling.

Please note any concerns you may have, or confirm that you are happy to proceed with your dog staying with Applause 4 Paws

I am happy for my dogs (if more than one) to be kept together

I am happy for my dog to be kept together with other dogs in the same designated room.

I am happy for my dog to mix outside in your front garden area, with other dogs from different house holds.

I am happy for my dog to be walked outside the home environment/garden

I am happy for my dog to be let off the lead

I am happy for my dog to be walked with other dogs from a different household

Relevant medical and behavioural history, including details of any treatment administered against parasites and restrictions on exercise.

A record of the date or dates your dogs most recent worming and flea treatments were given.

I understand that I am solely responsible for any and all harm caused by my dog while my dog is attending Applause 4 Paws.

1. I further understand and agree in admitting my dog, that Applause 4 Paws has relied on my representation that my dog is in good health and has not harmed or shown aggression or threatened behaviour toward any person or dog.
2. I further understand that during normal dog play, my dog may sustain injuries. All dog play is carefully monitored to avoid injury, but scratches, punctures, or other injuries may occur despite the best supervision.
3. I further understand that Applause 4 Paws is a place where animals co-mingle and I am responsible for the medical treatment of any injury or illness that my dog receives while in your care. I agree to pay all costs for my dog that may arise as a result of injury or illness.
4. I further understand that if I fail to provide proof of current vaccinations or if my dogs' vaccinations are found to be expired or otherwise incomplete, Applause 4 Paws has the right to refuse service until current proof is provided.

5. I further understand and agree that any behavioural or health problems that develop with my dog will be treated as deemed best by the staff at Applause 4 Paws, at their sole discretion, and that I will assume full financial responsibility for any and all expenses involved. I authorise Applause 4 Paws to obtain medical records and/or treatments for my dog in the event of injury or illness from my vet or from the closest veterinary clinic.

6. I further understand that my dog must be neutered or spayed before joining Applause 4 Paws.

7. I further understand that although my dog is vaccinated against kennel cough there is still a possibility that my dog may contract kennel cough. I agree that I will not hold Applause 4 Paws responsible if my dog contracts kennel cough while attending Applause 4 Paws.

8. I further agree to notify Applause 4 Paws of any infectious and/or contagious disease or condition my dog has been exposed to or is affected by. Diseases and conditions include, but are not limited to, kennel cough, fleas, worms, hepatitis, infectious skin disease and parvovirus.

9. I further agree to take all necessary actions or precautions to insure that my dog is continuously free of contagious, infectious, or otherwise communicable disease.

10. I allow and consent my dog to being photographed, videotaped, and/or used in any media or advertising by Applause 4 Paws.

11. I further understand that my dog has access to a fenced area outside and agree to assume full liability for damages to property or injury to my dog or others if my dog escapes.

12. I understand that Applause 4 Paws is not responsible for any lost, stolen, or damaged toys, leads, collars, beds or any other item left with the dog.

13. I further understand and agree that each of the terms stated above will be in force every time my dog attends Applause 4 Paws.

I agree to abide by the terms and conditions and accept all terms, conditions, and statements of this agreement. I hereby release

Applause 4 Paws of any liability of any kind caused by my dogs' attendance and participation at Applause 4 Paws.

Dogs Name \_\_\_\_\_

Your Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_