

# A Time Four Paws Waivers & Permissions

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Four Paws Rule

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(518) 709.6438

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Date: \_\_\_\_\_ Name of Owner \_\_\_\_\_

Name of Dog #1 \_\_\_\_\_ Dog #2 \_\_\_\_\_

*While every precaution will be taken to prevent accidents, injury, fire, sickness, escape, dog fight, death, etc. animals are placed at A Time Four Paws LLC at the risk of the owner.*

## General Waiver

Every consideration is given to insure the safety and well being of all animals in the care of A time for Paws LLC. Every precaution is taken for each service provided and in allowing each dog accepted to participate in any service offered. In consideration of being able to participate in any services provided by A Time Four Paws, I, in full recognition and appreciation of the dangers and risks inherent in such activities including but not limited to ear pulls, punctures, scratches nail tears, etc that can occur during Daycare, Training Grooming and/or overnight boarding and pet taxi service, do hereby waive, release, and forever discharge A Time Four Paws LLC and any of its employees/trainers from and against any and all claims, demands, actions or causes of actions for costs, expenses or damages to personal property or personal injury, or death which may result from my participation in these activities.

I understand and admit that my participation in any of the services with A Time Four Paws LLC is **voluntary**. I assume full responsibility for any injuries or damages to me or my dog resulting in my participation in this training program along with all costs associated with any injury or damage. I understand that A Time Four Paws LLC will use reasonable judgment in all phases of participation of any service to avoid unnecessary risks and dangers. I recognize and understand that the activities may be hazardous, that **my participation is solely at my own risk and that I assume full responsibility for any resulting injuries and damages.**

*My signature below represents my understanding that A Time Four Paws LLC will take pictures and the photos and/or videos taken of my pet(s) and/or me will be used in any and all of its publications and social media sites including website and calendar, without payment or other consideration. I understand and agree that these materials are the property of A Time Four Paws LLC. I waive any right to royalties or other compensation arising or related to the use of the photograph.*

*My signature below represents my understanding that any vaccine, particularly Bordetella, is a prevention method, however, there is no guarantee against my dog being diagnosed with this or any other virus that may be transmitted via air or saliva during my pet's participation in any activity. I understand that if my dog is diagnosed with Kennel Cough or any other virus, he/she will not be allowed to attend daycare until symptoms have subsided. I understand that exposure is a risk regardless of steps taken to avoid such exposure and hereby waive, release, and forever discharge A Time Four Paws LLC and any of its employees/trainers from and against any and all claims, demands, actions or causes of actions for costs, expenses resulting from exposure.*

• Private Lessons • Daycare • Behavior Modification  
Petsitting • Overnight Home Boarding

## **A Time Four Paws Waivers & Permissions**

**Name of Dog #1** \_\_\_\_\_ **Dog #2** \_\_\_\_\_

When weather permits, pools and sprinklers are utilized to help keep my pet(s) comfortable in extreme heat temperatures. I understand this may result in my pet being wet or damp upon pickup from said participation.

**Permission to Seek Medical Treatment** \_\_\_\_\_ **(Sign)**

I, in full recognition and appreciation of the dangers and risks inherent in pet care Services, authorize A Time Four Paws LLC to make emergency veterinary medical decisions (under the advice of a licensed veterinarian), for the pet named in this document in the event that I cannot be reached. I accept financial responsibility for the emergency care of the animal(s) listed above.

**My signature below confirms that I have read each section of this Waiver and agree to release A Time Four Paws LLC from any claim, demand or action as described in each section of this waiver.**

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name of Owner

# A Time Four Paws Waivers & Permissions

Owner Name \_\_\_\_\_

Name of Dog #1 \_\_\_\_\_ Dog #2 \_\_\_\_\_

## Grooming Services Please read:

- **Matted Fur** - Unfortunately, we may have to shave your dog. Since mats rest tightly on the skin, they often hide pre-existing conditions. Shaving mats can cause or reveal injuries such as inflammation, infections, restricted movement, and blood circulation problems. In particular, because mats on ears restrict blood flow they can cause hematomas. Removing mats can trigger a sudden rush of blood to the ears. Thus, bleeding can occur; typically at the tips of the ears.
- **Seniors** - We will do our very best to complete your senior dog's groom quickly. Sometimes senior dogs need breaks to keep them comfortable. This creates a longer total groom time. Also, grooming can be stressful for your pet at later stages of life. We are not responsible for the injury or sudden death of your pet.
- **Nail Trims** - At times, if your dog is moving or fidgeting too much during nail trims, the quick could be unintentionally cut because the moving and fidgeting caused the trimmer to go too short on the nail. We apply powders and first aid to clean the area in order to avoid excessive bleeding or possibility of infection. This is usually not a serious issue but in some dogs, for reasons not apparent at the time of service, this could be excessive and need medical care. We are not responsible for problems arising from nail trims due to an unintentional cutting of the quick.

*I realize that grooming requires the use of scissors and other cutting instruments and that such use may result in injury if the animal being groomed moves suddenly. I understand that when shaving, cuts and scrapes may result because mats are very close to the skin. I understand my pet has a mind of its own and may not cooperate with us causing itself injury. A Time Four Paws LLC and its employees shall not be held responsible for the animal(s) named above. In the event of illness or injury, a qualified veterinarian will be summoned. I will pay the cost of medication and the veterinarian's bill. While every precaution will be taken to prevent accidents, injury, fire, sickness, escape, dog fight, death, etc.; animals are placed at A Time Four Paws LLC at the risk of the owner. I agree to the above conditions.*

To the best of my knowledge, the above information is accurate. I have also read and understand and agree to the policies of A Time Four Paws.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name of Owner