

Coastal Canine Daycare
2667A Cranberry Hwy
Wareham, MA 02571
Phone: 508-322-9929
coastalcaninewareham@gmail.com

I, _____, release Coastal Canine Daycare from the following liability while under care:

- I understand that by signing this Waiver and Release, I assume complete responsibility for any risk of injury, personal property damage, pet loss/theft, or death that may arise while Coastal Canine Daycare is watching my pet(s)/ property/home.
- I understand that there is a possibility that my pet could be lost or escape, be injured during play, or die, while being left with a sitter. It is possible that my home, property, or personal belongings could be damaged. By this signing, I take full responsibility and waive all claims of damages to personal property injuries, diseases, loss/theft, or death pertaining to my pet(s) associated with Coastal Canine Daycare. This includes, but is not limited to, cuts/punctures, scratches/chewing on household items, walls, or flooring, accidental disease from outside or the sitter themselves, and loss of pet by escaping (ie, open door or gate) or being stolen from the property.
- Coastal Canine Daycare is not responsible even if the injuries, damages, illness, loss/theft, or death were caused by negligence on my part or Coastal Canine Daycare, or any other party under or affiliated with Coastal Canine Daycare.
- I have informed Coastal Canine Daycare of any physical issues, behavioral issues, or disabilities my pet may have.
- Coastal Canine Daycare is given express permission to seek veterinary assistance in the event of an emergency. I allow Coastal Canine Daycare to take any and all steps needed to obtain medical treatment for my dog. I assume full responsibility for any and all charges incurred. This includes, but is not limited to diagnosis, treatment, grooming, medical supplies, and boarding. I understand that my dog's veterinarian may not be available for treatment in the event of illness/injury.
- In the event of an emergency, Coastal Canine Daycare will make reasonable efforts to ensure the safety of my dog which may include removing them from the home and contacting me and/or my emergency contact regarding treatment as soon as the issue is concluded to be non-life threatening or contact is possible.

I have read and fully agree to the terms of this waiver. I understand that by signing this waiver, I release Coastal Canine Daycare of any liability.

Signed on _____ by myself, _____ (please print name.)

Your signature _____

Emergency Contact Information

Name:

Phone Number:

Name:

Phone Number:

Name:

Phone Number: