

K9 AQUATICS SPA POLICIES AND RELEASE

Thank you for choosing K9 Aquatics, Inc. We have strived to make our spa inviting and comfortable to that your visit is a pleasant and enjoyable one for you. Since we are located in a private residence, please respect our neighbors and our spa by complying with the following spa policies:

Your Arrival at K9 Aquatics

- When you arrive, please wait for the prior client to leave before exiting your car. If the prior session is running a little late, please know that you will always be entitled to your full session time.
- Please make sure that your dog goes potty prior to your appointment. You may use our designated potty area (grass on either side of the brick path). Please respect our neighbors and do not allow your dog to go potty in our neighbor's yards. Doggy waste bags are provided so please pick up after your dog and discard the bag in the designated trash can. Note: After a warm water session, your dog will probably need to go potty. If you have more than one dog, please take your dog to the designated potty area to relieve itself after its session.
- Due to health considerations, we reserve the right to charge you up to a \$300 cleaning fee if your dog defecates in the pool. If this occurs, we may need to drain and refill the pool and this means that we must reschedule our other client's appointments for the next 24-48 hours.
- For the safety of your dog, please keep your dog on leash when outside the spa. The City of Sammamish does observe a leash-law policy.

In The Spa

- Only one dog per person (with a maximum of two dogs and two people) is allowed in the water at one time. If you have more than one dog with you, please keep the dog that is not in the water restrained on a leash or in your car.
- Please do not allow your dog to run loose in the spa while you are in the water. All dogs must be in the water with you or restrained.
- Please do not allow your dogs on the furniture.
- No food is allowed in the spa or water at any time.
- Towels are provided for your use to dry your dogs. If you will be going in the water, we kindly request that you bring your own towels for human drying. If you wish to dry your dog after the session, please leave yourself enough time so that the next client can start their session on time.

In General

- Please let us know of any health changes to your dog. Some conditions may limit the amount of exercise or exposure to warm water your dog should have. Note: You should always discuss warm water exercise and massage with your vet if the health of your dog changes.
- Prior to any exercise program or activity, it is advised that you do not feed your dog for 2-3 hours prior to and one hour after the appointment. Note: You should check with your veterinarian to see if this is acceptable for your dog.
- You are responsible for the actions and well-being of your dog and any guests while on the premises.
- Please let us know if there is anything we can do to make your experience more enjoyable.
- Please respect our spa, our private residence and our neighborhood.

Agreement for payment and cancellation policy:

Please be aware that cancellations made less than 24 hours in advance may incur a charge unless we are able to fill the appointment. As long of a notice as possible is very much appreciated. If you fail to show up for your appointment and do not cancel or reschedule, we reserve the right to not book future sessions or request payment in advance.

Indemnity, Release and Waiver (to be signed by all people attending a session and/or entering the water)

I, the undersigned, warrant that I am the owner or person responsible for the dog(s) brought in for services at K9 Aquatics, Inc., and therefore accept and promise full responsibility by this indemnity for damage to property or injury or death, people or other animals arising out of use of the grounds and spa and the actions and conduct of the undersigned and my dog(s), and accordingly agree to indemnify K9 Aquatics, Inc., and its owners, employees, independent contractors and independent therapists, for money damages and attorney fees; and further waive all personal claims and release K9 Aquatics, Inc., its owners, employees, independent contractors and independent therapists for damage, injury or death sustained by me, arising out of my participation in the activities and services of K9 Aquatics, Inc., or presence on or use of the premises where services are performed; and further waive subrogation claims of insurers.

ated this	_ day of	, 20	_ Signature _	
rinted name:				
ated this	day of	, 20	Signature	
rinted name:				
ated this	_ day of	, 20	_ Signature _	



Dog's Name	Dog's Birthdate or Age	Breed
Street Address		
City	State	_ Zip
Home Phone Number	E-Mail	
Cell Phone Number	May we contact you	by text message? Yes No
	Phone Number _	
Please let us know how you he	ard about K9 Aquatics?	
Veterinaria	an Information	Telephone Number
1		*
Chiropractor/Acupuncturist		
Othor		
Other		
Has your dog had a recent injur	ry? YES NO (If Yes, please d	lescribe below)
, ,	, — — · · · · · · · · · · · · · · · · ·	,
Has your dog had recent surger	ry? YES NO When?	By Whom?
Please describe your understan	ding of the surgery (i.ewhat side it v	vas performed on etc.)
Trease deserree your understand	unig of the surgery (i.e what side it v	was performed on, etc)
Please describe and list the date	es of any other/older past injuries and	surgeries.
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
swim exercise program? YES _	an if we have any further questions reg	garding your dog's participation in a
swim exercise program? TES_	NO	
Does your dog have any proble	ems with bowel/bladder control? YES	NO (If Yes Please Explain)
Does your dog have any proble	onis with bowel bladder control. This	(If Tes, Tieuse Explain)
Is your dog current on vaccinat	tions (or titers): YES NO Met	hod: Vaccinations Titers
If No, please explain:		
Please list methods, if any, that	t you use for flea control on your dog a	and at home:

(please continue on to next page)



Please describe your dog's relationship with water:

Does your dog enjoy swimming after to	oys? YES NO	If yes, what type?
Please describe any emotional component that we can better honor his/her boundar possible during our sessions together.		end that you would like us to be aware of so to be as comfortable and confident as
What do you feed your dog?		Feeding Schedule:
What kind of treats does your dog enjoy	y?	
Does your dog have any food (or other)	allergies?	
Please list any supplements or medicati	ons of any type that yo	ou give to your dog:
Supplement/Medication	How Often	Reason
Is there anything else you would like us	s to know about your d	log?
Thank you fo	r taking the time to	ofill out this form!
FOR SPA US	SE ONLY (Notes/Mo	odifications/Dates)
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