

Walk With Me Services Co - Application Form

Dog Walking, Sitting, Training, Home Visits and Transportation

Owner Information

Name _____

Phone # _____ Emergency Contact # _____

Address _____ City _____ Postal Code _____

E-Mail Address _____

Dog(s) Information

Name _____ Breed _____

Male / Female _____ Spayed / Neutered? _____

Age / birthday _____

Vet Name _____ Phone # _____

Vet Address _____

List your dog(s) current vaccinations _____

How does/do your dog(s) play and interact with the other dogs? _____

Has/have your dog(s) ever shown any aggressive behaviour towards other dogs, animals or people?

If yes, please explain. _____

Is/are your dog(s) toy or food possessive, or reactive under certain conditions? If yes, please explain.

Would you like your dog(s) to be let off leash at designated off leash parks / beaches _____

Please advise of any medical conditions _____

Please advise of feeding instructions _____

Please advise of any specific sleeping routines _____

Walk With Me Services Co - Release Waiver

Dog Walking, Sitting, Training, Home Visits and Transportation

Walk With Me Services Co strives to provide a safe and enjoyable environment for all dogs in its care. Dogs enjoy great neighbourhood, trail and / or beach walks that match the dogs energy level and can also enjoy off leash play in designated off leash areas if appropriate. Dog boarding is provided in a comfortable family home setting with a safe fully fenced yard near trails, parks and beaches.

As the dog owner I understand that a dog(s) can sometimes be injured or become ill during walks, training, boarding and transportation. I further understand that every dog(s) reacts differently and that animals, by nature, are unpredictable. Therefore, on behalf of myself (and my personal representatives, heirs, executors, and administrators) I understand and agree to the following:

I understand that as the dog owner I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are participating in activities with Walk With Me Services Co. I assume all related risks, both known or unknown to me, while my dog(s) is/are being care for by Walk With Me Services Co.

I understand and agree that in releasing care of my dog(s) to Walk With Me Services Co, Walk With Me Services Co has relied upon my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behaviour towards any person or any other dog.

I further understand that due to the way that dogs interact with one another, bites, cuts and scratches can occur even though the dogs are carefully supervised at all times.

While my dog(s) is/are in the care of Walk With Me Services Co, if I am unreachable in the event of an emergency, I hereby authorize Walk With Me Services Co representatives to seek immediate veterinary care for my dog(s). I agree to be financially responsible for any and all costs in connection with, veterinary, medical or other treatment.

I agree to release and hold harmless Walk With Me Services Co, from all liability including its owner and / or its employees, should my dog(s) become lost, injured or inflict any injuries to another animal or person not due to any negligence on Walk With Me Service Co part.

I specifically, without limitation, agree to fully indemnify Walk With Me Services Co for any and all such liability, claims, suits, actions, losses, injury or damage.

I certify that I have read and understand the terms of this agreement. I accept all the terms of this agreement and confirm the truthfulness of the contents of the above Application Form completed for a period of twelve months.

Dog Owners Name _____ Signature _____

Walk With Me Services Owner _____ Signature _____

Date _____

walkwithmeservicesco@gmail.com

778-678-8248