

Release and Indemnification

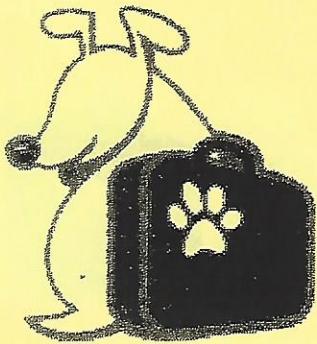
I understand and acknowledge that pets can be extremely unpredictable in behavior and while Bowzee Wowzee LLC performs its services, the chance of injury to my pet is possible. I assume all risks related to Bowzee Wowzee LLC services to my pet including but not limited to: illness, bodily injury, death, theft, bites, natural disasters, the unavailability of emergency medical care, or the negligence or deliberate acts of third parties.

I agree not to sue and hereby release from liability Bowzee Wowzee LLC, its officers, owners, agents, employees and other persons or entities involved with the services offered by Bowzee Wowzee LLC, from all actions, claims or demands for injury, loss or damage regardless of the cause.

It is the intention of the parties to this agreement that the foregoing releases shall be effective as a bar to all actions, fees, damages, losses, claims, liabilities, demands or debts whatsoever, of any nature of kind, known or unknown, suspected or unsuspected, arising out of the performance of Bowzee Wowzee LLC services. The parties to this agreement expressly consent that this release shall be given full force and effect in accordance with each and all of its express terms and provisions.

PET OWNER _____

DATE _____



Health Care/Power of Attorney

BowzeeWowzee LLC will make every effort to contact you in the event of a Health Care decision involving your pet. However, if we should be unable to reach you, we will need formal authorization to request care for your pet on your behalf. Please review the following Health Care Power of Attorney and sign below.

I, the undersigned owner, hereby designate BowzeeWowzee LLC to act as my attorney-in-fact and to act in my name for the medical benefit of my pet, upon the terms and conditions outlined below:

- **Effectiveness.** This Health Care Power of Attorney shall become effective immediately requiring immediate care for my pet during my absence of if deemed necessary to preserve the life or well-being of my pet.
- **Powers.** By the execution of this Health Care Power of Attorney, it is my intention that my attorney-in-fact shall have authority to make all the Health Care decisions for my pet to the same extent I would, including but without limitation the following; to employ and discharge medical personnel; to execute documents; to provide written consents/releases for treatment; to obtain and administer prescribed medications; and to incur reasonable and necessary fees and costs in carrying out the powers and duties under this document that shall be reimbursed by me upon demand by BowzeeWowzee LLC.
- **Indemnification.** I shall hold harmless and indemnify my attorney-in-fact from all liability for acts pursuant to this power of attorney.

PET OWNER _____

DATE _____



This is a contract between "Bowzee Wowzee LLC (hereinafter called "kennel") and the pet owner whose signature appears below (hereinafter called owner")

- Owner agrees to pay the rate for boarding which is per day _____ (dog), per day _____ (cat). I understand the current fees at the kennel and they may change at any time with notice.
- Owner agrees to pay all costs & charges for special services requested & all veterinary costs for the pet during the times pet is in the care of the kennel.
- Owner agrees that the pet shall not leave the kennel until all charges are paid for by owner or agent.
- The Owner represents that pet is healthy & free from disease unless otherwise specifically disclosed.
- Kennel shall exercise reasonable care for the pet delivered by the owner to kennel for boarding. It is expressly agreed by Owner & Kennel that the Kennel's liability shall in no event exceed the lesser of the current chattel value of a pet of the same species not to exceed \$200.00. The Owner further agrees to be solely responsible for any & all acts or behavior of said pet boarding & any damages or injury caused by the pet.
- All charges incurred by Owner shall be payable upon pick up of pet, or when billed by Kennel at the address on file. Owner will pick up pet on the designated pick up date, or if unable to do so will notify the Kennel within 24 hours of the pick up time and date. Any pet left for seven (7) days following pick up date, without notice to the kennel with payment, will be conclusively be deemed abandoned & will be turned over to Kennel as an abandoned animal.
- By signing the Contract and leaving his/her pet with the Kennel, Owner certifies to the accuracy of all information given to the Kennel.
- The Owner of an elderly pet understands that when older pets are boarded they are placed under a great deal of stress, because of removal from their normal home environment. This stress can cause latent (dormant) physical conditions (such as heart, liver or kidney disorders) to become agitated. This can result in illness or death of the Pet. The owner for the pets described herein agrees not to hold this boarding facility responsible for, the illness or death of their pet or any expenses incurred.
- Must have signed Health Care Power of Attorney on file with Kennel.
- This contract contains the entire agreement between the parties. All terms & conditions of this Contract shall be binding on the heirs, administrators, personal representatives & assigns the Owner & the Kennel.

PET OWNER _____
KENNEL REP _____

DATE _____