

K9 Aquatic Care Centre

15 Ontario Rd Walkerton ON NOG 2V0 519-901-2858 k9care.walkerton@gmail.com

TERMS AND CONDITIONS

Please read all the following important safety information. It applies to our parking lot, reception area and the swimming pool area.

HEALTH AND SAFETY – HUMANS:

allowed to continue using our facilities.

It has been explained to me that I may be asked to walk/participate in exercises/therapy to motivate my dog. I understand that there are trip/slip hazards including other people and dogs present. I have been advised that I should wear suitable non-slip footwear. Dress shoes with heels are not permitted as it may puncture or damage our non-slip flooring. I will inform K9 Aquatic Care Centre if I am unable/unwilling to participate. I will also inform K9 Aquatic Care Centre if I have any disability or medical condition that limits my ability to participate or puts me at greater risk of injury. Children are not allowed in the pool area. I understand that I am responsible for the safety of visitors accompanying me while at K9 Aquatic Care Centre as they may not be familiar with procedures and hazards that I have been made aware of. Due to our liability insurance restrictions only K9 Aquatic Care Centre are allowed in the pool. ________initial

rules are for everyone's safety and comfort, most importantly the safety of our canine clients.

Clients who have been warned and continue to disregard the above guidelines will not be



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CHANGES OF CIRCUMSTANCE:

I will inform K9 Aquatic Care Centre of any changes to medication, any surgical procedures or changes in veterinary advice affecting my dog. I understand that any of these changes may affect the type, and duration, of treatment. I will inform staff if my dog is receiving treatment elsewhere, e.g. physiotherapist, chiropractor, massage treatment, TTouch practitioner, acupuncture, etcetera. I will inform staff immediately if my dog contracts any infectious or contagious disease, e.g. kennel cough. ______ initial

DISCUSSION OF RISKS:

Physical exercise together with the pressure of the water on the chest and abdomen can put more stress on your dog's cardiorespiratory functions. If there is an undiagnosed cardiac or respiratory condition your dog could be at risk. While all due care will be taken, if your dog has a diagnosed, or an undiagnosed, spinal condition, there is a possibility their condition could be worsened by hydrotherapy. Please do not feed your dog for at least three hours before and one hour after hydrotherapy. _____ initial

CLEANLINESS:

There are poop bags and a place for disposal when entering the facility. If your dog poops, please clean up and dispose. If you need a poop bag or help, please do not hesitate to ask. We do not mind assisting you as accidents can happen with elderly, young, or disabled dogs. Please toilet your dog before hydrotherapy. The pressure of the water on the bladder and bowels may increase a dog's urge to go. Allowing them to do so before entering the pool allows us to have uninterrupted swim time.

APPOINTMENTS:

Late arrivals - please call us to inform us that you are running late. We care about our clients and appreciate knowing if you are running late. Up to 10 minutes - we will start the swim, but your dog(s) will be required to leave the pool area to enable the next client's appointment to start punctually. Over 10 minutes late - we may allow the next client to start their dog swimming and try to fit you in at the end of their appointment. This will not always be possible; we will try to accommodate you as time allows.

Missed appointments - these are defined as appointments that have not been cancelled 48 hours prior to your scheduled appointment. If you have an emergency, please call us so we know that you will not make your scheduled appointment. We do understand that emergencies happen and exercise the right to waive the cancellation fee under emergency conditions. In any of the above cases, a \$35 session charge will apply. The charge will be added to your next session or deducted from your multiple swims per week package.



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Cancellations - We require a minimum of 48 hours notice if you need to cancel your appointment without incurring a session charge. You may notify us by telephone, text message, or email.

DECLARATION:

I hereby give permission for my dog to receive treatment at K9 Aquatic Care Centre. I have given all relevant medical and behavioral history to staff and believe the information to be correct. I give permission for K9 Aquatic Care Centre to exchange information with my veterinary practice about my dog's condition and behavior. I will not bring any dog to K9 Aquatic Care Centre which has contracted, or knowingly been exposed to, any infectious, or contagious, disease. I agree to abide by all the Terms and Conditions which have been explained and discussed with me by a member of staff. ______Initial

INDEMNITY, RELEASE AND WAIVER Standard Industry Release:

The undersigned warrants he or she is the owner/guardian or person responsible for the dog(s) brought in for services at K9 Aquatic Care Centre and therefore accepts and promises full responsibility by this indemnity for damage to property or injury or death, people (guests included or other animals arising out of use of the grounds and pool by the undersigned and/or his or her dog(s), and accordingly agrees to indemnify K9 Aquatic Care Centre, it's owners, employees, independent contractors and independent therapists, for money damages and attorney fees; and further waives all personal claims and releases K9 Aquatic Care Centre, its owners, employees, independent contractors and activities and services of K9 Aquatic Care Centre or presence on or use of the premises where service are performed: and further waives subrogation claims of insurers. When participating in the pool or having a massage K9 Aquatic Care Centre will not be responsible for any injuries a human may incur to themselves, the children under their care, dogs or guests. Children must always be accompanied by a parent or guardian and supervised closely when on the premises.

Client's Name:	
Client's Signature:	
Guardian/Agent's Name:	
Guardian/Agent's Signature:	