



1050 Gilmour Road, Gibsons BC  
ph: (604) 886-1724  
email: [info@happytailsranch.com](mailto:info@happytailsranch.com)

## WAIVER

Name of Dog: \_\_\_\_\_ Name of Owner: \_\_\_\_\_

Telephone: \_\_\_\_\_ Address: \_\_\_\_\_

**My signature on this document indicates that I have read it and clearly understand all of its terms.**

I understand that there are risks inherent in having my dog boarded in an environment where the dogs are not kept in cages. I also understand the special risks of having my dog walked off-leash by Happy Tails Ranch, as well as the risk of having my dog around other dogs, people, cyclists, horses, and motor vehicles. I acknowledge that Happy Tails Ranch will take such actions as are reasonable to minimize these risks, but I understand that it is not always possible for Happy Tails Ranch to prevent injuries that may occur during off-leash activities.

**I would like my dog to be walked:      ( ) on leash      ( ) off leash**

I will be responsible for the actions of my dog if it causes any damage whatsoever, including but not limited to damage or injury to other dogs, people, or objects while in the care of Happy Tails Ranch.

I understand and agree that Happy Tails Ranch is not responsible for any injury to or damage from any cause whatsoever caused to or by my dog while it is in the care of Happy Tails Ranch, provided that Happy Tails Ranch has taken reasonable precautions to prevent such injury or damage, and I agree to indemnify Happy Tails Ranch, its directors, shareholders, employees and servants from any loss, injury or damage they may suffer as a result of my dog or any damage to me as a result thereof.

I warrant that my dog is suitable to be in the care of Happy Tails Ranch and is not aggressive toward people or other animals. My dog is obedient and capable of following instructions. I will

immediately advise Happy Tails Ranch of any problems with my dog that could affect its behaviour, health or suitability for a communal living environment and off-leash activities.

I understand that Happy Tails Ranch will not accept dogs unless they have been spayed or neutered.

I understand that there are risks involved in having my dog cared for by Happy Tails Ranch. In the event of illness or injury, I authorize Happy Tails Ranch to take my dog to the nearest vet considered to be the most suitable by Happy Tails Ranch, its directors, shareholders, employees or servants, should Happy Tails Ranch deem it advisable. I agree to pay all vet care required or advised, in the opinion of the vet, to the amount of \$500. If the required care will exceed that amount, I know that Happy Tails Ranch will try to contact me at the telephone numbers I have given in this waiver. If they cannot reach me, Happy Tails Ranch is authorized to use their best judgment in deciding whether to go ahead with any form of treatment recommended by the vet, whether the cost of such treatment exceeds \$500 or otherwise, and I agree to pay for all such care.

I understand that having my dog in the company and environment of other dogs may involve risks regarding the contraction of illness. I understand that even regular vaccinations cannot completely guard against illness and disease, and that Happy Tails Ranch cannot in any way prevent, nor are they responsible for, any illness that my dog might contract.

**Please check one of the following:**

I will ensure that my dog is, and will be kept currently vaccinated

OR

I have consulted with a holistic veterinarian and have chosen not to continue with regular vaccinations. I warrant that my dog has been titer tested within the last twelve months. I understand all possible health risks associated with my decision, and take full responsibility for any repercussions or illness that my dog may contract.

I agree to provide proof of current vaccinations or titer test.

**Agreed and accepted this** \_\_\_\_\_ **day of** \_\_\_\_\_, 200\_\_ .

**Owner's Signature:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_