

As the Pet Owner, I understand that South Paw Acres (SPA) will use reasonable care and precaution against disease, sickness, death, escape, theft, fire, injury to persons, other pets, or to the personnel and volunteers of SPA, or other causes which may be associated with or the result of my pet's attendance at SPA. I also understand that the well-being of my pet requires participation in outdoor activities while in the care of South Paw Acres and, while SPA agrees to exercise reasonable care, I understand that unexpected events involving harm or damage may occur. I agree that the personnel and volunteers of SPA will not be liable for any problems which develop with respect to my pet, including but not limited to illness or changes in behavior while my pet is attending SPA. I hereby release SPA personnel and volunteers of any liability whatsoever and I further agree to indemnify and save them harmless against any and all claims arising from my pet's attendance and participation at SPA, including but not limited to, all costs, attorneys fees, expenses and liabilities in connection therewith, provided reasonable care and precautions are followed.

I further understand and agree that in admitting my pet to South Paw Acres that SPA personnel have relied upon my representation that my pet is in good health and has not harmed or shown aggressive or threatening behavior toward any person or any other pet at any time. I am responsible for informing SPA personnel of any changes in my pet's behavior or health each time my pet is admitted to South Paw Acres. I understand that I have an ongoing obligation to notify SPA if there is any change in the information provided by me on the Enrollment Application or this Agreement.

I further understand and agree that should my pet become ill or need medical attention, I authorize SPA personnel, in their sole discretion, to administer aid and to authorize care by my designated veterinarian, if available, or by SPA's veterinarian. I understand that attempts will be made to contact me within a reasonable time of any such event. I acknowledge that I am financially responsible for my pet's health and I agree to assume and pay any and all expenses that may be incurred as a result of reasonable treatment authorized by SPA personnel.

I understand that SPA reserves the right to deny admittance and/or may remove from the premises any pet at their discretion. I agree that SPA may segregate my pet as deemed appropriate in SPA's discretion and in the event my pet should need to be removed from the premises, I understand that SPA will attempt to contact me at the phone numbers I've given them. In the event I cannot be reached or am unable to personally remove my pet from the premises within two hours, then I authorize SPA to remove my pet from the premises and to deliver my pet, at my sole expense, to either my designated veterinarian, if such veterinarian agrees to accept my pet, or to the custody of City of Columbia Animal Control.

I expressly agree that SPA's liability shall in no event exceed the lesser of the current chattel value of a pet of the same species or the sum of \$200.00 per pet. Any pet left more than five days longer than the scheduled pickup date may be placed with a shelter of SPA's choosing for re-adoption purposes. SPA shall have no further liability with respect to such pet upon delivery to such shelter. I understand that I will remain liable for any charges incurred.

By my signature below, I am acknowledging that my pet's vaccinations are current as defined by law, ordinance and/or standard veterinary practice, including a vaccination for Bordetella, and that my pet is currently spayed or neutered.

The terms of this agreement shall remain in effect indefinitely from the date of the execution of this agreement, unless sooner modified by the execution of a new agreement. I acknowledge that I have received and reviewed a copy of SPA's Policies and Procedures and that I understand and agree to comply with all of them. I understand that all fees are due at the time my pet is released from SPA unless other arrangements have been made with SPA in advance. I further agree to pay all fees when due including interest and late fees, if applicable. In the event my bill is turned over to an attorney for collection, then I agree to pay all attorney's fees and court costs incurred by SPA in connection with the collection of said fees. Any controversy or claim arising out of or relating to this contract, or the breach thereof, or as a result of any claim or controversy involving the alleged negligence by any party to this contract, shall be settled in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by an arbitrator may be entered in any Court having jurisdiction thereof. The arbitrator shall, as part of his award, determine an award to the prevailing party of the costs of such arbitration and reasonable attorney's fees of the prevailing party.

The undersigned specifically represents that he/she is the sole owner of the pet, free and clear of all liens and encumbrances and that the information provided in the Enrollment Application and this Agreement is true and correct to the best of their knowledge.

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The following person(s) have my permission to pick up my pet if I am unable to do it myself:

Name: \_\_\_\_\_ Phone #'s: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #'s: \_\_\_\_\_ Relation: \_\_\_\_\_

The following person(s) may be contacted and deemed in charge of my dog's welfare in an emergency if I, the Owner, am unable to be reached:

Name: \_\_\_\_\_ Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I have read the Policies & Procedures information page for SPA and agree to follow the guidelines outlined therein. (initial here) \_\_\_\_\_

Signature of Pet Owner: \_\_\_\_\_ Dated: \_\_\_\_\_