

Client Agreement

Address:	City:	State:	Zip:
	Cell Phone:		
Dog's Name:	Breed:		Age:
representation tha	I understand that the Urban Hound It my dog is in good health and has ior to any person or dog in admitti	not injured or shown a	iggression or
volunteers will not property of mine v Playground. I here	nd that the Urban Hound Playgrour the liable, financially or otherwise, while my dog is participating in serv by release the Urban Hound Playgr ticipation in any and all services pr	for injuries to my dog, vices provided by the U ound of any liability of	myself or any rban Hound any kind arising
otherwise will be to discretion, and in	nd and agree that any problems witreated as deemed best by staff of what they view as the best interest insibility and all liability for any and the of my dog.	the Urban Hound Playg of the animal. I unders	round, in their sole tand that I assume
dogs. I agree that environment for n and while in their carefully monitore that during the co	further understand that there are risks and benefits associated with group socialization of dogs. I agree that the benefits outweigh the risks and that I accept the risk. I desire a socialized environment for my dog while attending services provided by the Urban Hound Playground and while in their care. I understand that while the socialization and play is closely and carefully monitored by the Urban Hound Playground staff to prevent injury, it is still possible that during the course of normal play my dog may receive minor nicks and scratches from roughhousing with other dogs. Any injuries to my dog will be pointed out by staff upon pickup		
Playground I herel	nderstand by allowing my dog to participate in services offered by the Urban Hound lyground I hereby agree to allow the Urban Hound Playground to take photographs or use ages of my pet in print form or otherwise for publication and/or promotion.		
damage caused by	further understand that I am solely responsible, financially and otherwise, for any harm or damage caused by my dog while my dog is attending any services provided by the Urban Hound Playground.		
agreement, I here deemed necessary the cost of any suc understand that if according to the g animals by owner.	If my dog is not picked up on time of authorize the Urban Hound Play of for the continuing care of my dog is continuing care upon demand by I do not pick up my dog, the Urbar uidelines provided by Minnesota stalso acknowledge that I will be full abandon my dog.	ground to take whateve . I will pay the Urban Ho y the Urban Hound Play n Hound Playground wil tate law regarding aban	er action is ound Playground ground. I I proceed donment of
Signature:		Date:	



Medical Release

This is a required form for all Urban Hound Playground participants receiving services.

The safety and well-being of your dog(s) is of the highest importance here at the Urban Hound Playground. Ensuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously. We also do our best to have our pet parents screen for pre-existing health conditions, but unfortunately some factors may be beyond our control.

In the event that a medical emergency arises while a dog is at our facility or participating in a service that we provide, it is imperative that we are able to seek medical attention immediately at the closest available facility. We will call ahead to ensure that the office can handle the emergency at hand and contact the next closest office if not. We notify you, the owner, after we have secured a medical treatment center for the animal to avoid delays that may be caused by delays in contact, emotional distress, etc. Our goal is to get your pet medical attention as quickly as possible. Your dog will be rushed to the closest available facility for treatment and you will be notified. We notify the owner after we have secured a medical treatment center for the animal to avoid delays that may be caused by emotion on the part of the owner. Our goal is to get your pet medical attention as quickly as possible, without any distractions that may interfere with that process.

Therefore, I understand that in the event of a medical emergency, the Urban Hound Playground reserves the right, at its sole discretion, to declare the need of the immediate attention of a licensed veterinarian. I authorize the Urban Hound Playground to seek medical attention at the closest available veterinary facility without my verbal consent. I further agree that I am financially responsible for any medical services my dog receives as a result of said declared medical emergency and release Urban Hound Playground of any financial or otherwise liability.

Signature:	Date:
Printed Name:	