



9555 Redland Rd.
Milton, FL 32583

Dog Training / Kennel Boarding Contract

Waiver of Risk & Release of Liability

Canine Name: _____

Breed: _____ Age: _____

Permanant ID: (Microchip / Tattoo): _____

Pertinent Notes Regarding Canine (Allergies, Aggressions, Medications, Etc.):

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Work: _____ Secondary Phone: _____

Email: _____

Program Start Date: _____ Approximate Program Finish Date: _____

High Sage Precision Kennels, LLC. (HSPK), its owners, representatives, employees, or volunteers, shall henceforth be referred to as "HSPK". The above-named Canine (dog) shall be referred to as "Canine ". The above-named Canine's owner and/or authorized agent shall be referred to as "Owner".

I, _____, am the Owner of the above-named Canine. I hereby enroll said Canine in the HSPK facility for either boarding, training, or both, and this contract is valid from this forward for anytime the Canine is checked in or out of the kennel for boarding and/or training. HSPK has presented to me that the trainer's facility located at 9555 Redland Rd., Milton, FL 32583 is safe and adequate to keep my Canine for the purposes specified. When not actively training or in the outdoor run, my Canine will be kept in a kennel for the duration of this contract, and I certify that I approve of the facility and it's containment of my Canine. I realize at times a subcontractor may be used to socialize, train, or transport my Canine, and that they will be operating as an affiliate of HSPK. My Canine will be fed twice a day (morning and evening) unless otherwise specified. I will supply HSPK with my Canine's monthly flea and heartworm prevention, as well as enough feed required for the duration of my Canine's stay, or I will be billed for HSPK having to supply the feed. I certify that my Canine's vaccinations (Rabies, Distemper, Infectious Canine Hepatitis, Canine Adenovirus Type 2, Canine Parainfluenza, Canine Parvovirus, Leptospira Canicola, Leptospira Icterohaemorrhagiae, Leptospira Grippotyphosa, Leptospira Pomona, and Bordetella) are up to date, and will not expire during their stay. While I certify my Canine is vaccinated, I understand circumstances occur and animals get sick and even have viral breakthrough of vaccines. If my Canine causes damage to facilities or HSPK, I understand that I am responsible for said property or personnel. I also understand that various training sites may be used to train my Canine, and that various properties may present safety hazards that are unforeseen and/or high risk (snakes, insects, vegetation, embankments, other canines, etc.), and that HSPK and it's affiliates will not be liable for any of such hazards.

I am enrolling my Canine into the following program:

_____ General Obedience (In Board).....	\$ _____
_____ General Obedience (Per Day).....	\$ _____
_____ Basic Gun Dog Training (In Board).....	\$ _____
_____ Basic Gun Dog Training (Daily/Tune Up).....	\$ _____
_____ Retrieve Training (In Board).....	\$ _____
_____ Puppy Work - for preferred skill (In Board).....	\$ _____
_____ Parasite Prevention (Per month).....	\$ _____
_____ Dog Food (Monthly).....	\$ _____
_____ Boarding (Per day).....	\$ _____
_____ Training Birds (Per Bird); Bird Type: _____	\$ _____

ADDITIONAL TRAINING: If HSPK feels that additional time is needed to train the Canine and the Owner refuses additional time, HSPK shall not be responsible for reimbursements.

CANCELLATION OF TRAINING: If HSPK feels that after two (2) weeks in the training program that the Canine is not competent for such training, the Owner will be required to pick up the Canine within seven (7) days with ½ of all training fees returned (not valid for programs that are two weeks or shorter). If at any time the Owner wishes to cancel the training sessions, there will be no refund for services or deposits.

VETERINARY RELEASE: HSPK agrees to exercise due and reasonable care for the Canine for the duration of the contract. Owner agrees to release HSPK and hold harmless its owner(s), employee(s), or agent(s) from any responsibility and/or liability for injuries, conditions, illness, escape, or loss of life to the Canine that may occur during boarding, training, or transportation. The Owner understands that if their pet becomes ill or injured, or if the state of the Canine's health otherwise requires professional attention, HSPK, in a non-emergency situation will attempt to contact and inform the owner prior to seeking medical attention. If no contact can be made, or in an emergency situation, HSPK at its sole discretion, may enlist the services of a licensed veterinarian for treatment and thereafter attempt contact with owner. Furthermore, all expenses incurred from treatments will be the sole responsibility of the owner. If the Canine is found to display aggressive action towards another Canine or HSPK, the Owner accepts responsibility for any veterinary care to other Canines and/or Medical care to HSPK resulting from the Canine's action.

PAYMENT: Owner agrees to pay fees as follows: one month in advance and then at the close of each month for that month's training. The Owner will be responsible for coming to the kennel once per month for evaluation of Canine's progress. If the Owner is dissatisfied with the training, see *Cancellation of Training* above. If owner leaves Canine in the program, then Owner is said to be satisfied with the progress. Any additional training periods discussed during the duration of this contract shall be agreed upon based on the rates specified above. I understand that the training fees include expenses for training and boarding as needed. It does not include food, preventatives, supplements, grooming, or transportation. All payments will be accepted in money order, cashier's check, cash, Venmo, Zelle, or personal check and shall be made out to "Michael Blake" for "DOG TRAINING/BOARDING". All personal checks must clear prior to the Canine leaving HSPK facilities.

PERFORMANCE: Owner understands that HSPK's goal is to provide a Canine that is well adjusted and well trained as specified within the details of each program, however, the Owner acknowledges that HSPK, its owner(s), employee(s), or agent(s) make no warranties or guarantees, express or implied, as to the performance of the Canine following the chosen training period.

ABANDONMENT: If the Owner cannot be reached at or near the specified completion date of this contract to arrange final payment and pick-up of the Canine, HSPK will consider the Canine to be abandoned. A certified letter will be sent to the Owner's address as provided above, demanding payment within ten (10) days from the date of the receipt of the letter. If the Owner does not pay the amount due in full within the ten (10) day period and does not make specific arrangements for pickup/ shipping of the Canine, at that time, arrangements will be made for the Canine at the sole discretion of HSPK based on the understanding that the Canine has been abandoned.

I REPRESENT THAT I HAVE READ, UNDERSTAND, AND ACCEPT THE TERMS AND CONDITIONS STATED IN THIS AGREEMENT, AND ACKNOWLEDGE THAT THIS AGREEMENT SHALL BE EFFECTIVE AND BINDING UPON THE PARTIES.

Owner's Signature: _____ Date: _____

Print Name: _____

EMERGENCY CONTACT:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Cell: _____ Work: _____ Secondary Phone: _____

Email: _____

ATTACH MEDICAL RECORDS

Proof of rabies, parvo virus, leptospirosis, parainfluenza, adenovirus, distemper, Bordetella, negative heartworm test if over 6 months of age, negative intestinal parasite exam within last sixty (60) days.

This information can also be emailed to trainer@highsagekennels.com

Rabies Vaccine: ____/____/____

Parvo / Distemper / Adenovirus / Parainfluenza / Lepto : ____/____/____

Bordetella: ____/____/____

Heartworm Test: ____/____/____

Fecal Test: ____/____/____

Heartworm medication date dosed: ____/____/____

PAYMENT

Payment is due upon start of training / Canine drop off

Deposit: _____

Balance: _____

Training Rate Per Month: _____

Additional Charges:

Owner initials: _____ Date: _____

Additional Terms (If any):

