



**Pre-Existing Medical Condition
WAIVER AND ASSUMPTION OF RISK**

I, _____, Customer, voluntarily sign this Waiver and Assumption of Risk in favor of the Owner, The Animal Keeper, Inc., inconsideration for having my pet board or use day care services at the Owner's facilities, as follows:

_____ With full knowledge that my pet will be exposed to the general population of dogs and cannot be isolated from any airborne viruses or pathogens carried by other boarding dogs.

_____ With full knowledge that my pet has a pre-existing medical condition or injury described as follows:

I understand that there are certain risks and dangers associated with completing a Pre-existing Condition waiver and that these risks have been fully explained to me. I know and understand that this facility does NOT have medical personnel on staff and that any incident of a serious nature would require a veterinary visit for treatment. I fully understand the risk involved.

I fully assume the risks involved as acceptable to me and I agree to use my best judgment in undertaking these activities and follow all post boarding instructions.

I waive and release the Owner from any claim for personal injury, property damage, that may arise from my use of the facilities.

I am a competent adult, at least 18 years of age, and I assume these risks of my own free will.

Signature of Customer

Printed Name of Customer

Dated: _____
MM/DD/YYYY