



Membership Application

Client Name: Nick Wu Dog Name: Daisy

Street Address: 1 Georgia Ave

City, State, Zip: Island Park, NY 11558 Email: findnickwu@gmail.com

Primary Phone: 917-667-7783 Alternate Phone: 646-256-0309

Dog Gender: M / **F** Breed: Mixed (mostly Labrador we think) d.o.b. 03/17/2021

Veterinarian: Island Park Animal Hospital (just joined them) Weight: 28 lb Neuter/Spayed? **Y** / N

Please provide vaccination records from your Vet. R _____ D _____ B _____

Medical Conditions / Special Instructions: _____

(Circle below with comments)

Does your dog have Allergies? **No** Yes To what: _____

Separation anxiety? **No** Yes How does it behave?

she does not have separation anxiety but she just wants to come out and play whenever she can and gets excited to be around people.

Food Aggression? **No** Yes People or Animals? How is it exhibited?

She gets excited to see/meet people and dogs and just wants to say high and play

Is your dog a puller? No **Yes** Does it chase Cars, Bikes, Strollers? **No** Yes

Jump or thrust itself at people? No **Yes** Likes children? No **Yes**

Is your dog a runner or jumper? (such as fences) **No** Yes Please explain:

so far she only teared her screen door of her soft kennel while we're waiting for hard kennel. She does get zoomies but nothing destructive.

Has your dog ever shown any aggression (bit anyone or another dog)? **No** Yes

Please explain:

She has ran into neighbor dogs but only shows excitement and happiness. Needs to restrain her every now and then when too excited so other dogs do not getting annoyed or overwhelmed.

Our number one concern is the safety of your pet and others. We pride ourselves on taking NON-Aggressive dogs and want to keep our guests safe. The more information you can share about the personality of your pet will provide our staff valuable insights and make his/her stay more enjoyable.



Boarding / Daycare Agreement

This is a contract between **The Barrie Inn, Fido Fitness Club (FFC Corp)** and the **pet owner**.

- All pets boarding **MUST** be up to date on Distemper, Rabies and Bordetella (Kennel Cough)
- For sanitary purposes, all pets are checked upon arrival – If the pet requires a bath or special bath (flea, medicated, etc.) prior to joining the general population, an additional charge will be applied to your bill.
- If your pet has any medical issues, whether physical or mental, please inform us so we may fully attend to their specific needs. An additional service charge may apply.
- Any dog that has trouble getting along with other dogs will be separated for their own safety. Please inform us if you feel your dog has any issues with other dogs, large or small.
- The dog(s) will be fed separately and regularly, walked outdoors several times a day, and will be housed in a clean and safe environment.

THE BARRIE INN is a member of the American Boarding Kennel Association and abides by all rules and regulations of the ABKA.

HOLD HARMLESS: As with every animal in our care, due diligence and care is being exercised. Therefore, The Barrie Inn will not be held liable for the loss of or damage to pets or belongings due to disease, theft, fire, running away, injury, or harm to persons; other pets; or property by said pet.

Owner further agrees that pet shall not leave The Barrie Inn / Fido Fitness Club until all charges are paid in full. The Barrie Inn / Fido Fitness Club shall have, and is hereby granted, a lien on the Pet(s) for any and all unpaid charges resulting from boarding pet(s) at our facility.

If pet(s) becomes ill or if the state of the animal's health otherwise deteriorates in any manner, The Barrie Inn / Fido Fitness Club, in its sole discretion, may engage the services of a veterinarian of its choosing, administer medication, or give other requisite attention to the pet(s) at the expense of the said pet(s) owner.

It is understood by The Barrie Inn / Fido Fitness Club and the pet owner that all provisions of this contract shall be binding upon to both parties for this and all subsequent visits; this contract contains the entire agreement.

Fees as of the Date of this Agreement*

- Overnight Boarding Fee based on dog's weight.....\$_____
- \$5.00 per day charge if we provide the food. Unless requested, we do not feed dogs in Daycare.
- \$2.00 per medication administered.
- Boarding Pick up after 12:00 noon, or Drop off after 5:00 pm, a \$20.00 daycare fee is applied
- Daycare pickup after 7:00 pm will incur a \$10 late charge up to 7:30 pm and \$20 if picked up after 7:30 pm. A dog left with us after 8:00 will be boarded and the prevailing boarding fee will be applied.

* We deserve the right to increase Fees at any point after the Services provided upon the date of this agreement. The laws of the State of New York govern this contract. In the event of a dispute the parties hereby agree to resolve said dispute through mediation. If any provision of this Agreement is unenforceable, it will be given effect to the fullest extent possible, and the remainder of the Agreement will continue in full force and effect.

Client Signature: _____ Date: 08/05/2021

Print Name: Nick Wu Approval: _____

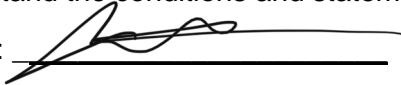
Dog Park Agreement

I, Nick Wu, hereby certify that my dog(s) named Daisy is (are) in good health, and has not been ill with any communicable condition in the last 30 days.

I have read and I understand the following:

1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending FFC Corp. dba Fido Fitness Club, whether to dogs or human patrons or to Fido Fitness Club staff.
2. I agree that in admitting my dog(s) to FFC Corp. dba Fido Fitness Club, the staff has relied on my representation that my dog(s) has/have not harmed nor shown aggressive or threatening behavior toward any person or other dog.
3. I agree that FFC Corp, dba Fido Fitness Club and its members, staff, contractors, and agents will not be liable for problems, damages, or injuries caused by my pet during its visit at Fido Fitness Club. I, as the pet owner (or as pet's authorized agent), agree to be solely responsible for any and all acts and behavior of my pet while in the care of Fido Fitness Club.
4. I hereby release and agree to indemnify and hold harmless FFC Corp dba Fido Fitness Club from any liability arising from my dog's attendance and participation in any activities at Fido Fitness Club.
5. I understand that Fido Fitness Club is an open play area and a place where animals co-mingle in groups. I recognize that there are inherent risks of illness or injury dealing with animals. Similarly, I understand that when dogs play in groups, they may sustain injuries, such as nicks and scratches. I understand and agree that any problem or injury that develops with my dog is my responsibility, and will be treated as Fido Fitness Club deems best at its sole and absolute discretion. Fido Fitness Club staff may wait until I pick up my pet to inform me of any non-serious injury. In the event my pet becomes ill or injured to the point of requiring medical treatment, Fido Fitness Club will first attempt to contact me, followed by an attempt to contact the emergency contact listed on the enrollment form. If circumstances deem necessary, a local veterinarian will be chosen by Fido Fitness Club to treat my dog. I agree to pay for all medical treatment received by my pet, including transportation to an emergency facility.
6. I further understand and agree that if my dog displays aggressive behavior, that for the safety and health of my dog and others, my dog will either be confined to a separate room (with walks), for a portion or the remainder of its stay with no offset or reduction in price, or be disqualified as a Fido Fitness Club member.
7. I further understand and agree that since Fido Fitness Club is also an indoor Dog Park and that I and my family members and/or friends will be playing in an open area with other dogs at my and my family's/friend's own risk. I certify and agree that I hold harmless FFC Corp. dba Fido Fitness Club, its staff, owners, and other members for any instance or injury that may be caused during my/our visit at Fido Fitness Club.
8. I further understand and agree that Fido Fitness Club may video tape, audio tape, photograph or otherwise record or reproduce the image and sound of my dog(s) while at our facility, and Fido Fitness Club shall own all rights, title, and interest in the imagery. I further agree and consent that my dog(s) may be used by Fido Fitness Club to advertise, publicize or otherwise promote Fido Fitness Club.
9. I further understand that I am responsible for my dog if it is not neutered/spayed. If my dog has become uncontrollable or causes major distraction, I understand that it might be moved to a crate or other quiet area.

I certify that I have read and understand the policies of FFC Corp dba Fido Fitness Club as set forth in the preceding sections and that the information I have provided is true to the best of my knowledge; and that I have read and understand the conditions and statements of this agreement:

Client Signature:  Date: 8/05/2021

Print Name: Nick Wu

Authorization for Emergency Medical Treatment

The undersigned owner of the dog named Daisy hereby authorizes a licensed veterinarian, and whoever may be designated as assistants, to administer such treatments and to perform such procedures as are considered therapeutically or diagnostically necessary for the care of my animal, including the administration of anesthesia.

In the event that emergency treatment is required, I authorize the veterinary staff and their assistants to perform medical and surgical treatments necessary to preserve the life of the patient until I can be contacted for further authorization.

I understand that no guarantee of successful treatment is made. I accept financial responsibility for the treatment of the above-named patient, and I understand that payment in full is due upon the release of the patient from the veterinary hospital, or when the veterinary service is otherwise terminated. I understand that I am entitled to a written statement of charges at my request.

Veterinary service is provided during nighttime hours as necessary in the judgement of the veterinarian in charge. Continuous presence of qualified personnel may not be provided.

I certify that I have read and fully understand this authorization for emergency medical treatment, the reasons why this treatment is considered necessary, as well as the advantages and possible implications.

I hereby release Fido Fitness Club and The Barrie Inn and all staff from any and all claims arising out of such an emergency situation.

I certify that I have read and understand the terms and conditions stated in this agreement, and acknowledge that this agreement shall be effective and binding upon the parties.

Client Signature: _____



Date: 08/05/2021

Print Name: Nick Wu

Phone: 917-667-7783