

POUND TOWN, INC BOARDING & DAYCARE

23901 W Industrial Drive N, Plainfield IL 60585 815-782-4444

OFF LEASH PLAY AREA, POOL & RENTAL WAIVER

PLEASE READ THIS FORM CAREFULLY AND BE AWARE THAT IN CONSIDERATION FOR PERMISSION TO USE POUND TOWN, INC OFF LEASH PLAY AREA, POOL AREA YOU WILL BE EXPRESSLY ASSUMING THE RISK OF, AND LEGAL LIABILITY FOR, AND WILL BE WAIVING AND RELEASING ALL CLAIMS FOR INJURIES, DAMAGES, OR LOSS WHICH YOU AND/OR YOUR DOG MAY SUSTAIN AS A RESULT OF PARTICIPATING IN, ANY AND ALL ACTIVITIES CONNECTED WITH OR ASSOCIATED WITH THE USE OF THE OFF LEASH PLAY AREA (DAYCARE), POOL AREA, AND THE SURROUNDING AREAS.

I HEREBY UNDERSTAND THAT THE OFF LEASH PLAY AREA, POOL AREA AND SURROUNDING AREAS WILL BE KNOWN IN THE FOLLOWING LANGUAGE AS "PLAY AREA"

I hereby acknowledge that I have voluntarily applied to participate and use with my dog(s) the off leash and/or pool area(s) owned and operated by Pound Town, Inc. I understand that the act of unleashing my dog(s) and being physically present within the areas defined above, necessarily involves a risk of injury to me, any persons that accompany me, other people using the above defined areas and/or surrounding, my dog(s), and other dog(s).

- I understand that these risks are entirely my responsibility and I expressly assume that responsibility knowingly and voluntarily. When this Waiver and Releases refers to "my dog(s)" it includes me whether or not I am the legal owner of the dog(s), since I am the person responsible for the dog(s) while using the Off Leash Play Area, Pool Area or other surrounding areas in the facility.
- I understand that there is risk of serious injury, including death, to the dog(s) its owner/handler, other persons or other animals. I further understand that dogs, irrespective of their training and usual behavior or characteristic, may act or react unpredictably at times based upon instinct or circumstances, and that not all hazards and dangers associated with dog activities can be foreseen.

I agree to assume the risk of any injury to my dog(s), me, and individuals (including children) that accompany me to this facility and my dog(s).

Dog(s) Name: _____

Owners Printed Name Address

Signature Date: ____/____/____

Waivers will be kept on file and effective for one calendar year.