

Physical Rehab - New Client and Waiver Forms

Thank you for creating your online portal and requesting an evaluation with us! Please fill out the additional information below. **All fields are required in order for your evaluation request to be confirmed.** Thank you!

Primary Owner/Account Name:

Primary Owner/Account Phone Number:

Secondary Owner/Account Name (N/A if none):

Secondary Owner/Account Phone Number:

Secondary Owner/Account Email:

Primary Veterinarian/Associated Clinic:

Specialty Veterinarian/Associated Clinic:

Current Medications:

Does your pet have insurance? Yes No

If yes, who is the provider?

Does your pet have any dietary restrictions or food allergies? Yes No

If yes, please list:

Has your pet had a recent surgery or will they be having surgery in the future? Yes No

If yes, please list the type of surgery and date of procedure:

If no, please explain why you are seeking physical rehabilitation for your pet (i.e pain management, weight loss, injury not requiring surgery):

How did you find out about us? (ie. veterinary referral, social media, friend referral, etc.)

Please read the important information below before signing

Physical Rehabilitation Waiver and Release Form

Thank you for participating with your pet(s) in physical rehabilitation activities provided by the Physical Rehabilitation Team at The Dog Retreat and Spa, LLC. We sincerely hope that the care and supervision provided by our trained and qualified staff improves the physical health and well-being of your pet(s).

Appointment Policies:

- **Please ensure your pet has defecated prior to your appointment. If your pet is scheduled to utilize our hydrotherapy equipment and has not defecated prior to the appointment, we may suggest alternative rehabilitation resources to avoid the animal defecating during a hydrotherapy session. If we have to shut down hydrotherapy equipment as a result of your pet defecating, there is a cleaning/sterilization service fee of \$160.00.**
- **Please ensure your pet is bathed/brushed regularly prior to your hydrotherapy appointment to help maintain a clean environment for all of our patients and staff.**
- **As a courtesy please give 48 hours notice for any appointment cancellations. The Dog Retreat and Spa Physical Rehabilitation Center reserves the right to charge for services not rendered if notice is not given.**
- **You may be asked for proof that your dog is up to date on all vaccinations.**

The undersigned acknowledges that I have voluntarily agreed to participate in physical rehabilitation with my pet(s) at The Dog retreat and Spa facilities, which may involve using aquatic treadmills and other devices intended to provide physical rehabilitation for my pet(s). I further acknowledge that the use of these facilities and devices has some inherent risk, and despite the care, supervision and oversight of The Dog Retreat and Spa Physical Rehabilitation staff, accidents or injuries to me or my pet(s) can occur.

FOR MYSELF, MY FAMILY AND MY PET(S) PARTICIPATING IN PHYSICAL REHABILITATION AND OTHER ACTIVITIES AT THE DOG RETREAT AND SPA, I HEREBY WAIVE ANY CLAIMS AND COVENANT NOT TO SUE AND HEREBY RELEASE THE DOG RETREAT AND SPA, THEIR RESPECTIVE OVERSEERS, TRUSTIES, DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, AND REPRESENTATIVES OF AND FROM AND OF ANY LOSSES, DAMAGES OR CLAIMS OF ANY KIND OR NATURE ARISING OUT OF OR RELATING TO THE USE OF THE FACILITIES AT THE DOG RETREAT AND SPA AND PARTICIPATION IN PHYSICAL REHABILITATION ACTIVITIES AT THOSE FACILITIES BY MYSELF OR MY PET(S).

I hereby give my consent for The Dog Retreat And Spa, LLC to use photographs or video of my pet(s) participating in physical rehabilitation activities at The Dog Retreat and Spa for promotional and publicity purposes, which may include publication on The Dog Retreat And Spa's website. Yes No

Signature: #WEBFORM-SIGNATURE#

Print Name:

Date: