STAY N PLAY

DOG GROOMING AGREEMENT, AUTHORIZATION & WAIVER

This grooming waiver is a service-specific addendum to the general Service Agreement between the customer and Suzanne Wiebe, sole proprietor carrying on business as Stay N Play Doggie Daycare ("Stay N Play"). It controls only on grooming-specific matters.

OWNER, DOG & GROOMING INFORMATION

Owner's full legal name		**Primary phone**	
Authorized secondary pickup person's name		**Authorized pickup person's phone**	
Dog's name	**Dog's birthday**	**Breed**	**Age**

VACCINATIONS Rabies vaccination must be current. Rabies expiry: _____ Other omitted/overdue vaccinations:

List all health conditions, medications, allergies, recent illness, injury or surgery; attach a page if needed

_____

Handling or behaviour concerns, bite history, pain, sensitive areas or prior grooming problems

TERMS - PLEASE READ BEFORE SIGNING

1. Health, vaccination and behaviour disclosure: I confirm my dog is fit for grooming and I have disclosed all known or suspected medical, skin, ear, mobility, stress, medication, allergy, aggression and bite-history information. Rabies must remain current and every omitted or overdue vaccination must be listed. Stay N Play may refuse or stop service because of health, vaccination or safety concerns. If service is refused because required vaccination proof has not been provided, any unused deposit will be refunded; Stay N Play is not responsible for replacement-care, travel or other resulting losses, except liability that cannot lawfully be excluded. Acceptance is not a veterinary opinion. Employees are not veterinarians, veterinary technicians or other licensed medical personnel and do not diagnose, treat or medically monitor conditions.

2. Grooming risks: Grooming may involve water, shampoo, clippers, scissors, brushes, dryers, nail tools, humane restraint and close handling. Risks include stress, fatigue, soreness, minor cuts or nicks, nail clipper, clipper or brush irritation, quicked nails, ear or eye irritation, allergic reaction and aggravation of a hereditary, congenital, diagnosed, undiagnosed, hidden or pre-existing condition.

NOTE: When long nails are trimmed back the quick will be exposed and touch the ground making them bleed after the dog leaves the salon. Please bring something to protect your car if your dog's nails bleed.

3. Accidental outcomes and illness: An accidental clipper or razor burn, minor nick or irritation, kennel cough or another communicable illness may occur despite reasonable sanitation, screening, handling and care. Illness may be environmental, airborne, surface-borne or dog-to-dog, at Stay N Play or elsewhere; symptoms may appear later and the source may be impossible to determine. An outcome alone does not establish fault. I am responsible for related examination, testing, treatment, medication, veterinary care, transportation, expenses and losses, subject to section 7.

4. Matted or neglected coats: Matting can conceal sores, bruising, parasites, infection or fragile skin and make removal uncomfortable. I authorize the selected option below. The safest humane method may include clipping short or shaving matted areas; appearance may differ from the requested style and redness or irritation may become visible after removal.

5. Safety, estimate and completion: Stay N Play may change, shorten, stop or refuse service if my dog becomes stressed, ill, aggressive or unsafe. A humane muzzle or safety aid may be used when reasonably necessary. I remain responsible for the agreed price or reasonable prorated charge for completed work. No exact style or finish is guaranteed when safety, coat condition, health or tolerance requires a change. Additional dematting or handling charges and any material estimate increase require owner approval; if I cannot be reached, Stay N Play may stop the service.

6. Emergency authorization: If illness, injury or distress arises, I authorize basic non-veterinary assistance within staff ability, veterinary contact, relevant information sharing and transport to my veterinarian or an emergency veterinary clinic in London, Ontario. Stay N Play acts only as my limited agent under the general Agreement and does not make medical decisions. Reasonable contact efforts will be made unless delay could increase risk or suffering. I pay all examination, testing, treatment, medication, veterinary, after-hours and transport costs; Stay N Play need not advance payment.

7. Assumption, release and indemnity: THIS SECTION AFFECTS LEGAL RIGHTS. To the fullest extent permitted by Ontario law, I assume the ordinary and inherent grooming risks and release Stay N Play, its proprietor, owners, employees, contractors and agents from claims, damages, losses, expenses, treatment and veterinary costs arising from the grooming service or my dog's presence at Stay N Play. This includes damage or loss to personal property. including injury, illness, escape, loss, property damage or death, whether claimed in negligence, including ordinary negligence, breach of contract, bailment or occupiers' liability. If any release or exclusion is held unenforceable, Stay N Play's total aggregate liability arising from one dog, service, occurrence or series of related occurrences will not exceed $5,000, except liability that cannot lawfully be limited. This limit does not reduce the owner's payment or indemnity obligations. I will indemnify them for third-party claims, reasonable legal fees, animal or property damage caused by my dog, undisclosed information or my breach. This does not exclude reckless or intentional misconduct or liability that cannot lawfully be excluded. The general Agreement's severability, joint-and-several liability, Ontario law and survival terms apply. Owner initials: _____

OWNER AUTHORIZATIONS

☐ SELECT ONE — I authorize a short clip or shave-down if matting makes that the safest humane option.

☐ Do not shave down without contacting me first. If I cannot be reached, Stay N Play may stop. If neither or both boxes are selected, this option applies.

EMERGENCY VETERINARY LIMIT I have authorized my veterinarian to approve any veterinary procedure up to $_____. Amount must be completed; payment arranged: ☐ Y ☐ N. The general Agreement's exceed-limit and euthanasia directions apply.

SIGNATURES

Owner printed name: _____ **Owner signature:** _____	**Date:** _____
Second owner / authorized agent printed name: _____ **Second owner / authorized agent signature:** _____	**Date:** _____

By signing, I confirm I am at least 18, am the legal owner or have the owner's written authority, received and read this addendum and the general Agreement before service, and had the opportunity to ask questions and obtain independent advice. I will update information before service and sign a new addendum after a material change. Form version: August 2026