**Pool Rules**

* You **must** **sign** our waiver prior to entering the pool area. ***(see the bottom of the page)***
* Please do not feed your dog at least 3 hours prior to their pool time
* One dog on the dock at a time.
* Only dog on dock may be off leash all other dogs must be leashed at all times.
* Maintain a 6’ distance between all other dogs.
* **Maintain current BC Health Covid restriction protocols for social distancing and sanitization**
* **\*Absolutely no Flexi-leads on premises**
* Prong collars/E-collars/Harnesses must be removed before entering the pool area.
* Only **DOGS** are permitted in pool unless same day authorization is given to each person.
* No pushing or shoving dogs into the pool.
* Human aggressive dogs may be declined service unless you are a self serve, experienced dock practice client and will be evaluated case by case. They will be required to be muzzled when off the dock and on the grounds and be always under your complete control.
* Notify staff of any equipment damage or problems.
* Notify staff if your dog pottied on the deck or in the pool so we may sanitize properly.
* Fines may be implemented for cleaning **$50** dock accident **$200** pool accident.
* Take mid swim potty breaks to prevent accidents.
* Female dogs in heat are exempt from participating at all meets/dock practice/swim sessions.
* You are responsible for your dog’s waste, please pick up after your dog and use the refuse bins provided.
* All children under the age of **12** must be accompanied by an adult on the dock and wear a lifejacket. (not provided)
* All children under the age of **18** must have their parents’ consent/waiver signed.
* Make sure your dog is clean, that their nails are short and rounded
* If your dog is shedding, please brush thoroughly before swimming
* If your session is intro to ramp, pool and intro to dock diving, please bring high value FLOATING treats.
* Bring everything you will need for your dog: towels, floating treats, water toys, water bowl, water and a life jacket if you have one. We can provide a life jacket if you do not own one.
* Bring everything you will need for yourself and be prepared to get wet if you are actively involved in your dog’s swim session
* You and your dog may be asked to remain near your vehicle in the parking area while a previous appointment is exiting the premises.
* Your dog will not be allowed to swim if: they are not weight bearing limping, have had orthopedic surgery or injury within 9 months of session unless you provide a veterinary letter stating your dog can resume regular low impact activity.
* Your dog will not be allowed to swim if they have been vomiting, have diarrhea, have a skin condition, have had recent surgery or an open wound

**A Reminder…. Dogs must be under your control and on leash while off the dock. (NO retractable leashes permitted) They must be supervised by their guardians at all times**!

Name of Dog:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breed of Dog:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_ Colour:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vaccinations/Titers:

Up To Date Y/ N Friendly with people/ other dogs Y/ N. If no….give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous injuries/ surgery: Y/ N If Yes… give details and dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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AGREE TO THE POOL RULES: I agree to abide by the Pooch Pool School facility rules on the above, all laws and regulations, City by-laws, policies and instructions given in connection with Pooch Pool School and the use of the Facility and acknowledge that I have personally completed this Registration and Waiver Form. I understand that I am solely responsible for the accuracy of the information contained herein and do hereby release Pooch Pool School from any responsibility for verifying the information contained therein, and from any liability whatever that might arise out of a failure to do so. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereinafter “my dog”), hereby agree to the following terms and conditions of my dog’s participation in the activities at Pooch Pool School (hereinafter referred to as PPS). \*\* NOTE: Users of this facility do so at their own risk. Owners/Guardians are responsible for the actions of their dog. PPS shall not be liable for any injury or damage caused by any dog in this facility. \*\* WAIVER OF LIABILITY AND RELEASE: In consideration for allowing me and my dog to participate in swimming and or dock diving, I, for myself, my heirs, administrators, next of kin, executors, assigns and anyone acting on my behalf, do hereby release and hold harmless, covenant not to sue and to fully indemnify and forever discharge Pooch Pool School and Barepaws Dog Daycare (the landlord), their elected officials, officers, employees, agents, volunteers and contractors or other personnel in any way assisting or connected with PPS or Barepaws (collectively, the “Releases”), with respect to any and all injury, disability, death, or loss or damage to person, dog or property, as well as any claims, demands, or causes of action of any kind arising out of my participation in the sessions at PPS, I further agree and confirm that PPS and Barepaws shall have not assumed and shall not be deemed to be responsible for any further liabilities, responsibilities, or obligations to me in any manner whatsoever in consequence of permitting the use of PPS Facility hereunder.

HEALTH AND WELLBEING: I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby certify that my dog is in good health and has not been ill with any communicable condition in the last 14 days. I the undersigned do recognize that the dog described above has not/may have been examined by a veterinarian in the last 6 months. To the best of my knowledge the above described dog does not have any pre-existing conditions and or diseases that may be adversely affected by swimming, diving, or any other activities related to such while at our facility or on the grounds/property. 1. I understand that I am solely responsible for any harm caused by my dog(s) while my dog(s) is/are attending PPS. I understand that despite the best efforts of the employees at Pooch Pool school, accidents can occur. Pursuant to this agreement and in consideration of the due diligence exercised by the staff, I hold PPS and Barepaws harmless for any liability with respect to loss or damage resulting from disease, slips, falls, theft, fire, death, escape, or injury to myself or my dog. 3. Standard precautions will be used against injury, escape or death. PPS will not be held responsible for injuries that occur, provided standard care and precautions have been followed as determined at the sole discretion of PPS. I agree that despite the cleanliness of the facility and the water, dogs sometimes develop skin rashes if not dried properly. I will make sure my dog is dry to prevent any skin issues and that PPS is not responsible for any rashes or skin issues that may result after my dog swims in the pool. I agree that I may seek veterinary care for my dog(s) if such care is deemed reasonably necessary for the welfare of my dog(s), and that I assume full financial responsibility for any and all expenses involved. I hereby certify that my dog(s) will remain current in all vaccinations or titers as set forth by veterinarian requirements. I hereby agree to maintain my dog(s) flea preventative as appropriate. I will be responsible for any costs incurred for any such treatment if required.

TEMPERAMENT AND BEHAVIOUR: I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby certify that my dog(s) has/have not harmed or shown aggressive or threatening behavior towards any person or any other dog. If so, describe the circumstances:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I am also aware that if my dog shows aggressive or threatening behavior towards any person that I may be asked to leave PPS. I hold PPS harmless for harm to any person, other dog(s) or property by my dog. I hereby certify that my dog(s) is of sound mental health and reasonable disposition. I agree to abide by the judgment and expertise of PPS with respect to handling any potential temperament concerns. I understand that PPS reserves the right to refuse services or admittance to any dog for any reason. If your dog is found to exhibit any behavior that is deemed unsuitable by the staff of PPS they will be removed from the facility.

CONSENT TO BE PHOTOGRAPHED: I give permission to PPS and/or parties designated by PPS to photograph/video me, my dog or any of my permitted invitees, guests or affiliated participants and use such photograph(s)/video(s) , in all forms of media, for any and all promotional purposes including advertising, display, audiovisual, exhibition or editorial use.

 I have read, understood and agreed to all provisions of this agreement. I understand that allowing my dog to participate in activities at Pooch Pool School is not without risk to my dog, and I accept and agree to be fully responsible for the consequences of assuming such risks. I hereby release Pooch Pool School. Barepaws and their staff, agents, officers, members, and guests from any liability for injuries, illness or damage results from the actions of my dog(s), any other dog, or any human in and around the facility starting with the date indicated below and thereafter.

 ASSUMPTION OF RISK: I hereby willingly and knowingly assume any and all risks associated with my participation in the Event, whether now known or unknown, including, but not limited to, risk of or associated with injury or damage to myself, any other human being, my Dog or any other dog(s), however sustained and whether or not related to illness, traveling to or from the facility, falls, contact with my Dog or other dogs, the effects of the weather, including extreme temperature or humidity, the condition of any area or part of Facility, including sidewalks and parking lots I fully appreciate all of the risks just stated. DAMAGE OR LOSS: I will be fully responsible for all damages and/or loss that may be incurred from my participation in the sessions of PPS.

CONSENT TO MEDICAL TREATMENT: I hereby give permission to have the PPS staff arrange for any emergency medical care for myself, my Dog or any of my permitted invitees, guests or affiliated participants, including hospitalization and transportation, if necessary, to the administration of such emergency medical treatment as may be deemed necessary in the circumstances. I agree to pay all costs associated with medical care and transportation.

Full Name (print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 IN WITNESS WHEREOF I acknowledge and agree to the terms of this Registration, Waiver of Liability and Indemnity Form and I have the authority to execute it.

Witness name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of PPS staff.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_