

# Fastlane B & G LLC

## Owner Agreement

(Please initial & sign)

The name of the business is Fastlane B & G LLC. All future references in this document to “Fastlane” shall be meant to refer to Fastlane B & G LLC.

1. \_\_\_\_\_ Drop off/Pick up times are as follows:  
**Summer Hours:** June 1 – October 1 7am-9am & 6pm-8pm  
**Winter Hours:** October 2 – May 31 8am-10am & 5pm-7pm  
If I need different arrangements I will pre-arrange this with Fastlane. I understand there may be an additional fee for this special arrangement.
2. \_\_\_\_\_ I understand that while I am a visitor at Fastlane, I do so at my own risk and will accept responsibility for any and all injuries incurred.
3. \_\_\_\_\_ I waive and relinquish any and all claims against Fastlane, its owners and/or representatives, except those arising from negligence on the part of Fastlane.
4. \_\_\_\_\_ I understand that if my pet(s) have a history of aggression or biting, Fastlane reserves the right to refuse service.
5. \_\_\_\_\_ I have disclosed to Fastlane any and all dangers associated with my pet(s). i.e. medical issues, fence jumper, open gates, digger, etc.
6. \_\_\_\_\_ I understand that I am fully responsible for any medical care expenses and damages that result from injuries caused by my pet(s) while attending Fastlane.
7. \_\_\_\_\_ I understand that if any medical problems develop while in the care of Fastlane, I authorize Fastlane to do whatever they deem necessary for the safety, health and well being of my pet(s). I agree to take full financial responsibility for any and all expenses incurred. I agree that Fastlane, will make every attempt to have my pet(s) treated by the veterinarian and/or clinic I have specified, but in the event they can not be seen, Fastlane will have my pet(s) treated at *Dreaming Summit Animal Hospital*, by Dr. Matthew Hillebrand, DVM or his associates, at 5115 N Wigwam Creek Blvd, Litchfield Park, Az 85340, phone# 623-935-1555. An Emergency Animal Hospital if needed during afterhours.

8. \_\_\_\_\_ I agree Fastlane will dispense my pet(s) medication per my written instructions.
9. \_\_\_\_\_ I agree that for my pet(s) health and well being, I will supply my own pet(s) food to avoid any stomach upset or diarrhea. I also, understand Fastlane is very experienced in feeding all different diets including the raw diet and will follow my instructions on how I choose my pet(s) to be fed.
10. \_\_\_\_\_ I understand that all vaccinations (rabies & DHPP) including but not limited to Bordetella are current through out the entire stay at Fastlane. I also understand that Bordetella is a communicable disease, even with vaccination it is still possible to acquire kennel cough. Fastlane will take every possible precaution to insure my pet(s) health while in its care, but will not be held responsible for such disease.
11. \_\_\_\_\_ I understand it is my responsibility to provide and/or apply tick and flea prevention. Fastlane reserves the right to refuse service to any pet with any type of parasite infestation.
12. \_\_\_\_\_ I agree and understand that I can bring in personnel belonging into Fastlane, but that I do so at my own risk. Fastlane is not responsible for any damage to such items. Example: toys, beds, special collars, etc.
13. \_\_\_\_\_ I understand that when turned out in the play yards at Fastlane, my dog will be by itself or with other pet(s) I own if I so wish. No other pet(s) will be turned out with my pet(s) for safety issues.
14. \_\_\_\_\_ I agree and understand that in the event my payment to Fastlane is insufficient, Fastlane will take any and all legal actions necessary to collect the outstanding funds and I understand I will be responsible for any and all legal fees incurred. Acceptable form of payment is Check or Cash.

I have read and initialed all of the above and agree to comply:

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

Pet(s) Name: \_\_\_\_\_