**ONGOING MEDICATION FORM OF LIABILITY**

 I am at least 18 years of age, and I understand that I have enrolled my pet or pets for daycare and/or boarding with **Hop-It Holidays.** I am the legal owner of the pets(s). I assume all risk, danger, and responsibility for any or all injuries while the Pet is attending daycare, boarding, or other activities at the daycare facility.

 I agree to make Hop-It Holidays aware of any injuries, allergies, medical ailments, physical limitations, and pre-existing conditions, medication and dosage, at drop-off. I understand that any ongoing medications are approved with my consent for Hop-It Holidays to continue administering the advised and supplied medication at the dosage given on the booking form, and other injuries can occur to my Pet, even if the Pets are carefully supervised and handled.

 In the event my Pet requires medical attention, I authorize Hop-It Holidays to provide the maximum level of care required by any medical conditions. By signing this form, I am authorizing Hop-It Holidays to contact my veterinarian regarding any treatment needed by my Pet, and I agree to pay for any treatment Hop-It Holidays obtains for my Pet. Depending on the severity of the injury or illness of my Pet, I agree that Hop-It Holidays may make a decision to take the Pet to the nearest care facility, rather than my veterinarian of choice. I know that Hop-It Holidays will reasonably attempt to contact me and/or my emergency contact to discuss any injury or illness, but that circumstances may be such that decisions need to be made regarding my Pet’s immediate care before I can be reached. I also agree that, if Hop-It Holidays incurs additional expense when obtaining treatment for my Pet, including hourly staff expenses, veterinarian bills, and other costs such as mileage, I will be solely responsible for any such charges.

Signature:

Print Name:

Date:

Name of Pet:

Species:

Age of Pet:

Veterinarian Name:

Veterinarian Ph No: