



**West Chester Pet Resort**  
**12021 Iron Bridge Rd.**  
**Chester, VA 23831**  
**(804)-796-3632**

## **CANINE FITNESS TRAINING PROGRAM | INFORMED CONSENT**

**\*\*By submitting this form, I have read and agree to the terms and conditions listed below. \*\***

### **PROGRAM OBJECTIVES.**

**Personal Training:** I understand that my dog's physical fitness program is individually tailored towards me. The goals and objectives are agreed upon by my dog's personal Fitness Trainer, myself, and (in some cases) my pet's veterinarian.

**Group Training:** I understand that the canine physical fitness program is designed to accommodate multiple dogs with varying goals and fitness levels.

### **DESCRIPTION OF THE EXERCISE/CONDITIONING PROGRAM**

I understand that my dog's exercise program will involve participation in a number of types of fitness activities. These activities will vary depending on the objectives that my dog's personal trainer and I establish. The activities may include: 1.) aerobic activities such as, but not limited to, jogging and/or swimming; 2.) muscular and strength building including, but not limited to, the use of weights, resistance bands, and balance equipment; 3.) selected physical fitness and body composition assessments; 4.) any other activities selected by my canine fitness trainer, agreed upon by me, and (if applicable) approved by my veterinarian.

### **DESCRIPTION OF POTENTIAL RISK**

I understand that no exercise program is without inherent risks, regardless of the care taken by my trainer. My dog's personal safety will be a priority, but it cannot be guaranteed. I realize that when my dog is participating in any exercises, particularly those inducing cardiovascular stress, there is a slight chance of serious injury (e.g. cardiovascular accident) or catastrophic incident (e.g. death, paralysis). Likewise, I understand that engaging in muscular endurance, strength building, and other fitness activities may sometimes result in minor injuries (e.g. bruises, musculoskeletal strains and sprains, etc). Less frequently, more serious injuries may occur (e.g. muscle tears, herniated disks). On extremely rare occasions, catastrophic injury (e.g. death, paralysis) may occur. I understand that **West Chester Pet Resort** requires veterinary release forms to minimize risk. I also understand that **West Chester Pet Resort** is not liable for any injury resulting to my pet during these exercises.

### **DESCRIPTION OF POTENTIAL BENEFITS**

I understand that a regular canine fitness and conditioning program has been shown to have definite benefits for Canine Total Health. I know that some of these benefits can include reduction of body fat, weight loss, improvement of cardiovascular function, improved strength and muscular endurance, improved posture, speed, quickness, proprioception, power, balance, and flexibility.

### **PARTICIPANT RESPONSIBILITIES**

I understand that it is my responsibility to 1.) fully disclose any of my dog's health issues or medications that are relevant to participation in an exercise program; 2.) have my dog cease exercise and report promptly if any unusual feelings are noticed (e.g. difficulty breathing, injury, lameness, refusal to eat) during the exercise program; 3.) clear my dog's participation in a fitness activity with my veterinarian.

### **PARTICIPANT ACKNOWLEDGEMENTS**

In agreeing to this canine personal fitness program:

- I acknowledge that my dog's participation is by MY decision. I have the right to decline exercises or stop treatment at any time.
- I understand there are potential risks associated with participating in an exercise program. I believe the potential benefits outweigh those risks.



**West Chester Pet Resort**  
**12021 Iron Bridge Rd.**  
**Chester, VA 23831**  
**(804)-796-3632**

- I give my consent to certain physical touching of my dog that may be necessary to ensure proper technique, body posture, and safety.
- I understand that the achievement of health and/or fitness goals cannot be guaranteed. All dogs respond differently to each treatment.
- I acknowledge that I have a voice in planning and approving the activities chosen for my dog’s training program.
- I will have the opportunity to ask any questions regarding my concerns and confidence with the exercises.
- My dog is in good physical condition and currently has no physical impairments which might prevent him from participating in these activities. I have been advised to consult with my veterinarian prior to beginning this program.
- I have been advised to cease activity IMMEDIATELY if I notice my dog experiencing discomfort or if I feel the need to have my dog stop the program. I understand that my decision to cease the program will NOT result in a refund.

I have read and understand the above agreement. I have been able to ask any questions I might have and have had those questions answered prior to signing this agreement. I am freely authorizing this agreement.

**\*\*By submitting this form, I acknowledge that I have read and agree to the terms and conditions above. \*\***

**Your Signature:** \_\_\_\_\_

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

**Print Your Name:** \_\_\_\_\_

**Your Dog’s Name:** \_\_\_\_\_