

## Pet Policy and Waiver

| GUEST NAME:   | SUITE:  | CELL PHONE:  |
|---|---|--|
| ARRIVAL DATE:   | DEPARTURE DATE:   |  |
| PET(S) DESCRIPTION(S):  |   |  |
| As a responsible pet owner, I agree to according to a control or any degree of soiling caused by my pethat I am financially responsible for all requirements.   | et during my stay on th   | ne above dates. I understand   |
| I agree to a non-refundable Pet Guest Fee<br>(7) days. If my stay exceeds seven (7) nigh<br>(7) night period. Monthly rates are availak   | nts, an additional fee of 5   | 50.00 pet will apply per seven   |
| I agree that the presence of my pets(s) in<br>team members. Housekeeping will enter r<br>Sign" on my door, Housekeeping Manage<br>the suite between the hours of 8:00 am -  | my suite each day to cle<br>ement will call me to arr   | an. If I have a "Do Not Disturb  |
| I agree that my pet(s) will not be left unat<br>the event that my pet is left unattended,<br>during the servicing of the paid suite. I ac<br>the electronic lock on the outside of my s<br>that there is a pet(s) in the suite. I agree<br>sticker has been removed. I agree to not | , I will make arrangement<br>oknowledge that a desi<br>suite door by Housekee<br>I to notify the Hotel Op | ents to have my pet(s) caged<br>gnated dot will be placed on<br>ping Management to denote<br>perator if, for any reason, the |
| I acknowledge that at any time my pet(s<br>leashed or caged so that it does not cause<br>Pets are not allowed in the Health Club, C<br>in front of the Hotel.   | e concern to other gues   | ts at Les Suites Hotel Ottawa.   |
| By way of my signature below, I acknowle<br>for Les Suites Hotel Ottawa and accept re   |   |  |
| Guest Signature   | <br>Date  |  |
| Team Member Signature   |   |  |

CC: GUEST + HOUSEKEEPING DEPARTMENT