



Second Chance Dog Training Liability Waiver

I hereby acknowledge that I have voluntarily applied to participate in dog training activities with Second Chance Humane Society that will be held at the the Second Chance Shelter 177 County Rd 10 Ridgway CO 81432.

I am aware that there are inherent risks and hazards involved in activities with and around dogs, and I am voluntarily participating in these activities with knowledge of potential dangers. I am aware that any dog, regardless of training, handling, or environmental circumstance, is capable of biting and I expressly acknowledge the risks therein.

In order to participate in dog training classes or other activities, I, being fully informed of such risks and hazards, agree to assume all risks of such occurrences.

I hereby waive any and all claims or actions that I or my guardians or representatives may have, from any and all personal injury to myself, my dog, children in my charge, or harm to property or person caused directly or indirectly, through action or inaction of self or others, by acts that might occur in dog training classes, any other format of training activities or secondary training without trainer present or engaged.

I agree to indemnify Second Chance Humane Society and its employees and affiliates from any and all claims by myself, member of family, or any agent while within training facilities, within my home property, or in the general public as a result of any action or inaction, of either my dog or any other.

I also agree to assume sole responsibility for injury or damage caused by myself, children in my charge, or by the dog I own or handle and further agree to indemnify, defend and hold the instructors, trainers, assistants and property damage, loss, liability or expense, including legal cost and attorney's fees, which result from damage caused by myself, children in my charge, or by the dog I own or handle.

I confirm that my dog has no history of aggression and has not bitten another dog or person. (If your dog has issues with aggression please talk to our trainer about more appropriate individual training session.)

I also confirm that my dog is spayed or neutered _____ and current on Rabies and Distemper/Parvo vaccines. _____

I have provided current vaccination documents from a licensed veterinarian. I understand that anytime dogs are exposed to other dogs that there is a potential for disease transmission

Second Chance Dog Training Liability Waiver pg 2

I will not hold Second Chance Humane Society, the trainers or assistants accountable for any communicable disease.

Second Chance Humane Society may use pictures of me or my dog for publicity or promotional purposes without liability or obligation of any kind to me; however, no information/pictures can be sold or shared otherwise without additional consent.

I have read the attached policies for dog training and I agree to adhere to them.

Dog's name _____ Age _____
Spayed/Neutered _____(initials for confirmation)

Date:

Pet Guardian Printed Name: _____

Pet Guardian Signature: _____

List any Participants accompanying Pet Guardian:

