

- Playgroup
- Evaluation
- Interaction



**Waiver and Release of All Liability and Indemnification Agreement**

I, \_\_\_\_\_, understand that training my dog(s), \_\_\_\_\_ at the property physically located at 102 Old Riverhead Road West, Hampton Bays, NY 11946, or have my dog(s) trained by a representative of this foundation is not without risk of harm, illness or damage, injury to myself, my dog or my property. Although health and safety precautions will be taken such as the personalities of the dog(s), the level of dog handling experience of myself and others, the several types of physical activities, the unpredictable nature of animals poses a certain level of risk beyond the control of the staff and volunteers of the Southampton Animal Shelter Foundation. I assume full responsibility for all risks that my dog(s) and I may encounter while on Southampton Animal Shelter's Foundation's property or while the representative is on my property.

I hereby waive and release the Southampton Animal Shelter Foundation, the Town of Southampton, their departments, its employees, volunteers, and agents from all kind of liability for injury or damage which my family, my guests, my dog/puppy, or I may suffer while attending any training session or play group. I expressly assume the risk of any such damage, injury or illness while attending any training session or play group of the Southampton Animal Shelter Foundation at the shelter training center, surrounding areas and my property. I hereby waive and release all owners of other dogs from all kind of liability for injury or damage my dog/puppy or I may suffer while attending any playgroup or training session. I also hereby waive and release the owners of any other dog from all liability for injury or damage my dog or I might suffer while attending any training session at the Southampton Animal Shelter Foundation.

I understand that my dog's/puppy's vaccines must be current as per my veterinarian's recommendations at the start of training classes and I understand that my dog/puppy may not attend class if ill or proof of current rabies vaccination is not supplied to the Southampton Animal Shelter Foundation. Fees paid are non-refundable after the start date of class.

I certify that the following statements are true and correct and that the Southampton Animal Shelter Foundation staff and volunteers relied upon the truthfulness of information I provided to allow myself and my dog(s) to participate in these training classes.

1. I am 18 years of age or older.
2. I understand that control of my dog(s)/puppy(ies) is my sole responsibility always.
3. I certify that there are no physical or medical conditions that would prevent me or my dog from participating in training classes.
4. I certify that my dog is healthy and free from contagious diseases and is up to date on vaccinations (Rabies).
5. Proof of current rabies vaccination is mandatory. My dog will not be allowed to participate in the classes if proof of rabies is not provided. A refund is not granted due to inability to produce proper rabies vaccination.
6. I may ask for a copy of this waiver for my records.
7. I understand that the staff of the Southampton Animal Shelter Foundation has the right to remove or dismiss my dog from training class if they determine such a decision is necessary.
8. I agree to be responsible for any damages to property caused by me or my dog while on Southampton Animal Shelter Foundation property.

9. I hereby grant the Southampton Animal Shelter Foundation unrestricted permission to reproduce, broadcast, publish and distribute any video or photographs of me and/ or my dog(s) taken while attending training classes on Southampton Animal Shelter Foundation.
10. I hereby grant Southampton Animal Shelter Foundation the unrestricted permission to reproduce, broadcast, publish and distribute any videotape or photographic likeness of myself and/ or my dog(s)/puppy in acceptance of my use of Southampton Animal Shelter Foundation property, I hereby agree to indemnity and hold harmless the Southampton Animal Shelter Foundation, the Town of Southampton, their departments, employees, and volunteers from all claims made by me, members of my family, or any other person, because of any action by any animal or person while on Southampton Animal Shelter Foundation property.

I understand that by signing this document, I certify that I have read and voluntarily sign this Waiver and Release of all Liability and Indemnification Agreement. I understand that this document might be used in a court of law.

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