



**K9 TRAINING/SPORTS PARTICIPATION WAIVER
January-December 2017**

First Name: _____ Last Name: _____

Street Address: _____ City/State/Zip: _____

Telephone Number: _____

Email: _____

Dog(s) name: _____ Breed: _____ DOB: _____

In consideration of accepting this entry, I undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for losses and damages I may have against **ALPHA K9 U, LLC, and all other parties and their representatives, sponsors, successors and assignees for any and all injuries and all claims of damage**, demands and actions whatsoever which may arise as a result of my participation in this event.

**We reserve the right to refuse service to anyone for any reason at any time*

Mandatory Vaccination Policy: All canine guests must have hard copy proof from a veterinarian of up-to-date vaccinations and annual negative fecal tests in order to enter the Alpha K9 U premises, at any time, for any reason (including tours). Alpha K9 U requires Rabies, DHPP (Distemper, Hepatitis, Parainfluenza, Parvovirus), Bordetella, and a negative fecal float. In addition, a minimum of 48 hours after receiving vaccinations is required before entry. If the Bordetella vaccine has never been given, or has expired, it needs to be administered at least 14 days prior to arrival at Alpha K9 U, with no exceptions. Puppies are required to have their second set of DHPP and Bordetella vaccinations, and are required to have their Rabies vaccination by 16 weeks of age. I understand that my dog can contract Bordetella even if she/he has been vaccinated and I will not hold Alpha K9 U, LLC and/or any of their employees or clients responsible in the event that my dog becomes ill.

Physical Condition

I am physically fit to participate in any event(s) in which I have chosen to participate, and have not been advised otherwise by a medical practitioner. My dog is physically fit to participate in the event(s) in which I have chosen to participate and has not been advised otherwise by a medical practitioner.

Equipment and Facilities Inspection

I agree before I participate in any event I will inspect the related facilities and equipment, I will immediately advise the coordinator of the event of any unsafe conditions that I observe. I will refuse to participate in the event until all unsafe conditions observed by me have been remedied.

Assumption of Risk

I understand that I, and each participant in the event will be engaging in activities that involve risk of serious personal injury, illness, permanent disability, dismemberment and death, and that also involves the risk of severe economic and property loss and damage. I understand that these risks may result from the actions, negligence and failure to act of myself and others (including but not limited to other participants in, and sponsors, organizers and volunteers of the event) and from the rules of play, the challenges of the event and the condition of the property, facilities, or equipment used.

I also understand that there may be risks involved which are not known to me or to ALPHA K9 U, LLC, the sponsors, organizers and volunteers, and may not be foreseen or reasonably foreseeable by any of us at the time or the at the time of the activity in which I may participate. I assume all of the foregoing risks including the risks of any negligence by other participants of by ALPHA K9 U, LLC and their respective parents and subsidiaries and volunteers associated or affiliated with the event, the owners and or lessor of the property, facilities and equipment used in connection with the event, respective organizers, directors, officers, employees and agents of them all, and the other participants in the event (such as entity or individual being referred to as a "Released Party"), and the risk of injury caused by the condition of any property, facilities of equipment used during the event, and accept personal responsibility for any injury (including, but not limited to, personal injury disability, dismemberment and death), illness, damage, loss, claim, liability, or expense, of any kind or nature, that I or my property, including any of my dogs on-site during the event, may suffer arising out of or in connection with the event or my participation therein or attendance thereat.

Initials: _____

Facility Programs

As a part of course/programs of Alpha K9 U, LLC, I have an opportunity to participate in one or more activities, programs and field trips associated with classes; as a condition of such participation I agree as follows: I understand and appreciate the risks inherent in dog obedience, dog games, travel, field trips and the nature of the classes, and I voluntarily and knowingly assume those risks. I release Alpha K9 U, its employees, officers, Trustees, Directors and assigns from any liability for any injury or loss I might incur in connection with classes and/or field trip(s). I, for myself, my heirs, executors and administrators, waive and release forever any and all rights for claims and damages I may have against Alpha K9 U, its trustees, officers, employees and agents, including the staff members and supervisors, in any manner due to any personal injury or property loss sustained by me as a result of activities and traveling to and from the field trip destination(s) and/or my participation in the activities associated with classes and/or field trip(s), including any activities I may engage in while participating in classes and/or field trip(s). I agree to follow the standards established for the conduct of the participants in classes and/or field trip(s) or instructions of the University staff members on the trip(s). I understand that I will be responsible for my own welfare and safety.

Responsibility for Dog

I hereby acknowledge that I voluntarily have applied to participate and use, with my dog(s), for Obedience/Sports Programs and/or Field Trips arranged by Alpha K9 U. I understand that the act of unleashing my dog(s) and being physically present during such activities and field trips necessarily involves risks of injury to me, other people, my dog(s), and other dogs, which risks are entirely my responsibility. I expressly assume all these risks. I further understand that dogs, irrespective of their training and usual past behavior of characteristics, may act or react unpredictably at times based upon instinct of circumstances, and I agree to assume that this risk may result from aggressive, vicious, and dangerous dogs, which may be present. I further understand and assume the risk while away from Alpha K9 U, LLC facility, that not all dogs present and/or present in the "general public" have received the Rabies vaccine as required by law, and that not all dogs using "general public access areas" have been vaccinated for Distemper or Parvo all of which could result in injury to me and my dog(s). Additional risks include, but are not limited to: dog fights, dog bites and injuries to humans and other dogs; dog theft or unlawful capture; dog escape, plants and/or water sources in general areas may be harmful to dogs; vegetation may have burrs or seeds that could become tangled in a dog's coat or lodge in a dog's feet, ears, nose, or eyes; mosquitoes, ticks, chiggers, fleas or other insects may be present; wild animals such as skunks, raccoons, opossums, or stray dogs could be present, all of which might injure or infect your dog(s). I understand and expressly assume all additional risks. I also acknowledge that I am solely responsible for the acts of my dog or any dog I am handling, and I

warrant and represent that my dog and any dog I am handling has not bit any person, dog, or other animal so as to cause injury, except as described on a separate sheet of paper (describe incident and initial the description).

Liability Release and Indemnity Agreement

I hereby release and forever discharge and agree to save and hold harmless each Released Party of and from any and all injuries, including but not limited to my dog(s) personal injury disability, dismemberment and death, illness, losses, damages, claims, liabilities, or expenses of any kind of nature (and whether accruing to me, my heirs, or my personal representatives) that are caused or alleged to be caused in whole or in part by the action, negligence, failure to act or condition of the property, facilities or equipment of any Released Party and that arise our of or in connection with the event or my participation therein or attendance thereat.

I hereby agree to hold harmless and indemnity the Released Parties for any and all injuries related to, caused by, or arising from, either directly or indirectly, any act or omission of me, my dog, or any person or dog under my control and /or supervision, including but not limited to any damage, personal injury, death, loss, claims, liabilities, and expenses of any kind or nature.

Medical Treatment

In connection with any injury I may sustain or illness or other medical condition I may experience during my participation in or attendance at the event I authorized any emergency fist aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my own behalf. I further authorized the attending medical personnel to execute on my behalf any permission forms, consents, or other appropriate documents relating to medical attention and to act on my behalf if I am not immediately available to do so.

Severability of Provisions

I agree that the foregoing agreements are intended to be as broad and inclusive as is permitted by law. Any provisions herein found by a court to be void or unenforceable shall not affect the validity of any other provisions.

*** Registration and/or Participation are not complete until signed.**

No one may enter or participate in this event without signing the official venue waiver/first page of this document and this/third page of this document.

I have read and understand this release of liability, name and likeness release. I understand by signing this release I have given up substantial rights. I have voluntarily signed this release. If I am 18 years of age, I understand that I must have consent of my parent/legal guardian; evidenced by his/her signature below, to compete in this event. No one may enter this event without signing the official waiver.

Signature _____ Date _____

Signature of Parent or Guardian if Under the Age of 18 _____ Date _____

Please Initial if you DO NOT wish for Alpha K9 U, LLC to utilize photos, videotapes, biography, appearances, name, voice, likeness, and other information of yourself at any time _____