

Walk a Hound, Lose a Pound, Inc Dog Walkers Agreement

This waiver and release of liability, indemnification and hold harmless agreement is between the undersigned dog walker and the *Walk a Hound, Lose a Pound, Inc.* and its directors, officers, agents, legal representatives and successors "WAH LAP") as follows:

Initials

I am aware of the nature and hazards of participating in a program that includes walking and socializing dogs, which includes but is not limited to the possibility of being bitten, exposed to infectious diseases or parasites which could result in serious injury or death. I understand that WAH LAP cannot guarantee or be held responsible for the health, behavior or temperament of the dog I may handle or any injuries I may sustain as a volunteer for WAH LAP. I have reviewed the document "Dog Speak" and will participate in an orientation session with a WAH LAP volunteer prior to walking a dog.

I am aware of and understand the risks of participation in physical activity and the possibility of physical injury related to walking and/or running with a dog and that WAH LAP is not responsible for any injuries I may sustain related to walking and/or running with a dog. This includes but is not limited to sprained muscles and ligaments, broken bones, fatigue and heat stroke. I hereby state that I am in sufficient physical condition to undergo this activity.

I agree that my participation in this program is strictly voluntary and I freely choose to participate. I understand that WAH LAP does not provide any form of compensation or medical coverage for me. I will be responsible for any medical costs I incur as a result of my participation as a WAH LAP volunteer. In the event of sudden illness, accident, or injury which may occur while I am participating in an activity supervised by WAH LAP volunteers, I hereby give my consent for emergency medical treatment by any physician or other health care provider licensed by the State of Indiana as necessary under the circumstances.

I understand that WAH LAP may take photographs and give permission for their use in WAH LAP publications and news releases.

I agree, for myself and my heirs and personal representatives, known and unknown, to indemnify, release and hold harmless the WAH LAP from any and all liability for any casualty, loss, damage, injury, or death which is a direct or indirect consequence of my participation in a WAHLAP event, activity or program, notwithstanding the fact that such casualty, loss, damage, injury, or death may have been caused in whole or part by the negligence of the WAH LAP.

I acknowledge and agree that I have carefully read this Agreement, that I fully understand the same, and that I freely and voluntarily execute the same. I understand that I may seek independent advice prior to signing this Agreement. I attest to the fact that I am at least 18 years of age.

I acknowledge that I am accompanying a child or children under the age of 18 years and I will be supervising and assuming responsibility for the action(s) of this child/ these children.

Name (Printed)

Signature

Date