



Sit, Stay and Play AK Service Dog Owner / Trainer Agreement

Here at Sit, Stay and Play AK Service Dogs our owner/ trainer course is designed to train you, the dog's owner and your dog. Your first step is the application process. Training your dog to be your own service dog is a long term, in depth process, you must have consistency and perseverance. Please review the information in this packet and determine if this is something you are willing and able to do.

After you fill out the application there will be an interview and evaluation of both you and your dog, once that is completed and accepted you will both be enrolled in the owner training class. This training is once or twice weekly, for a minimum of 120 hours during that time you and your dog are trained in service dog behaviors, commands, and service dog management skills. Successful graduates pass the ADI Public Access Certification Test. Some teams need some extra training that will be determined within the course.

A completed application will have the following:

- An appointment for an evaluation where you and your dog must show the appropriate temperament, attributes, and interest.
- A confidentiality agreement form.
- A waiver of liability, assumption of risk, and indemnity agreement.
- Photo release.
- A completed application to enter the service dog program.
- A doctor form that has been completed by your primary care provider.
- Dog medical history from your veterinarian.

Please send completed packet to:

Sit, Stay and Play AK
14251 Jarvi Drive
Anchorage AK 99515

If you have any questions please feel free to contact us sitstayandplayak@gmail.com or sitstayandplayak.com



Sit, Stay and Play Owner/ Trainer Application

Your Information

Name:	Phone:
Address:	
City: _____ State: _____ Zip Code: _____	
E-Mail:	

Your dogs information

Dogs Name:	Age:	Breed:
Is your dog Spayed or Neutered Y / N	Is your dog current on vaccinations Y / N	
Please describe any behavior issues you are having with your dog: _____ _____ _____ _____ _____		
In what way can we assist you as a team: _____ _____ _____ _____ _____		



Sit, Stay and Play Release and Waiver Form

Release and waiver form for Sit, Stay and Play AK Animal behavior can be unpredictable and participation with Sit, Stay and Play AK owner/ trainer training is not a guarantee of your service dogs future behavior. By signing this form you hereby release and hold Sit, Stay and Play AK harmless from any claims of any kind, including but not limited to, bodily injury to yourself or people, animals or property during or after Owner training.

Printed Name:

Signature:

Date:

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Sit, Stay and Play AK
Owner / Trainer
Minimum Health Requirements for your dog

1. In accordance with Assistance Dogs International (ADI), all dogs placed as service dogs must be spayed or neutered before receiving public access. Dogs in training under the age of 13 months are exempt.

2. Sit Stay and Play AK may or may not accept a service dog of a person with a disability or special need into the training process until or unless the dog is spayed or neutered before the training begins. Exceptions are made for dogs under the age of 13 months.

3. Owner trained puppies must have puppy vaccinations series completed (three DA2PP).

4. Owner trained puppies must have rabies vaccinations by the age of 9 months.

5. Depending on the area of residence your dog may require heartworm, flea, and tick medications at the appropriate times of the year.

6. Kennel cough: If your dog has been exposed to and / or is showing signs of kennel cough they will not be allowed at the facility until the cough is gone or the incubation period is over.

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Sit, Stay and Play Dog medical history form

please have your vet sign completed form

Owners Name:	Phone:
Address:	
Dogs name:	Dogs birth date:
Male / Female:	Spayed / Neutered:

Your veterinarian's information

Veterinarian clinic:	Phone:
Address:	
Date of last physical exam:	Date of last fecal exam:
Problems noted:	

Please provide a copy of vaccination certificates

please describe this dog's general state of health and any major or recent problems you have noted. Please use separate sheet of paper if necessary

Veterinarian Signature :	Date:
Veterinarian Name :	Phone :



Sit, Stay and Play AK Confidentiality Agreement

I, _____, understand that as a client with Sit, Stay and Play AK, I shall, neither during, nor after the time of engagement with Sit, Stay and Play AK, except in the proper course of my engagement with Sit, Stay and Play AK or as requested by law, divulge to any person outside Sit, Stay and Play AK any confidential information concerning but not limited to other client's protected health information.

The contractual arrangements or affairs of Sit, Stay and Play AK and our employees/volunteers are founded on trust.

Any breach of this contract will result in termination of either employee or client.

Signature _____ Date _____

Witness signature _____ Date _____



Sit, Stay and Play AK Waiver of Liability, Assumption of risk, Release and Indemnity agreement

In consideration of participation in the Sit, Stay and Play AK Service Dog Training or Therapeutic Service dog, Service dog home visits and other support services, volunteer programs, fundraising events and any other event we are involved. I represent that, I understand the nature of this activity and am willing and qualified to agree to participate in such activity. I acknowledge that there are certain risks involved and I will immediately discontinue participating in the activity if I feel unsafe in any way.

I fully understand that this activity could involve risk of serious bodily injury, including permanent disability, paralysis and or death, which may be caused by my own actions, or inaction, those of others participating in the activity, the conditions in which the activity takes place, or the negligence of the “releases” named below; and that there may be other risks either not known or readily foreseeable at this time, and I fully accept and assume all such risks and responsibility for losses, cost and damages I may incur as a result of my participation in the activity.

I hereby release, discharge and covenant not to sue Sit, Stay and Play AK, its respective , administrators, directors, agents, officers, volunteers or employees, other participants and sponsors, advertiser's and if applicable other owners and lessors of which the activity is held (each considered one of the “releases” herein) from all liability claims, demands, losses or damages on my account caused or alleged to be in whole or part by the negligence or the “releases” or otherwise, including negligent rescue operations and I further agree that if, in despite this release, waiver of liability, and assumption of risk, I , or anyone on my behalf, makes a claim against any of the releases, I will indemnify, save and hold harmless each of the releases from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have up substantial rights by signing it and have signed it freely and without any inducement and assurance of any mature and intend to you be complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid to balance, notwithstanding, shall continue in full force and effect.

Printed name of Owner/ Trainer

Date

PARENTAL CONSENT

And I, the minor's parent and or legal guardian, understand the nature of the above reinforced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue and Agree to indemnify and save and hold harmless each of the releases from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or part by the negligence of releases or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor or anyone in the minor's behalf makes a claim against any of the above reaches, I will indemnify, save and hold harmless each of the releases from any litigation expenses, attorney fees, loss liability, damage, or cost any release may incur as the result of any such claim

Printed name of parent or guardian

Signature of parent or guardian

Date
