



Registration Agreement and Waiver

Animal Intake #: _____

I understand that while my pet is in the temporary care of VDART, reasonable attempts will be made to make my pet comfortable and safe. My pet will receive food, water and emergency medical care as needed during this time. If I have provided any medication, I have also provided instructions for administering it, and VDART has my permission to give this medication to my pet as needed.

I, _____ (the owner of the pet listed on the Intake Form), understand that an emergency exists and that special arrangements have been made to allow my family and pets to remain together in this shelter facility. I understand and agree to abide by the pet care rules contained in this agreement and have explained them to all other family member(s) accompanying me and my pet.

The following individuals are authorized to care for my pet:

Name	Relationship to Owner
1.	
2.	
3.	
4.	

PET CARE RULES

- My pet will remain contained in its approved carrier except at scheduled times.
- During scheduled relief time, my pet will be properly confined with leash, harness, and muzzle (if necessary). Scheduled times will be strictly adhered to.
- When possible, I agree to properly feed, water, and care for my pet as instructed by shelter staff.
- When possible, I agree to administer and document all medications given to my pet. If I am unable to administer medications to my pet, I will notify the shelter staff so that they can administer medications and provide proper documentation.
- When possible, I agree to properly sanitize the areas used by my pet, including performing proper waste disposal and disinfecting as instructed by the shelter staff.
- I will maintain proper identification on my pet and its carrier at all times.
- I will permit my pet to be examined by qualified animal shelter personnel to determine if medical or stress conditions are present and may require attention.
- I certify that my pet has no previous history of aggressive behavior and has not been diagnosed with any contagious diseases for which it has not received successful treatment.
- I understand that if my pet becomes unruly or aggressive, shows signs of contagious disease, is infested by parasites (fleas, ticks, lice, etc.), or begins showing signs of stress-related conditions, it may be removed to a more appropriate location.
- I understand that any decision concerning the care and welfare of my pet and the shelter population as a whole are within the sole discretion of VDART, whose decisions are final.
- I acknowledge that my failure to follow these rules may result in the removal of my pet to another location.

I acknowledge that the following items were loaned to me to provide proper care and confinement of my pet during the emergency: _____

<OVER>

- I _____ understand and agree to abide by the **Pet Care Rules** contained in this agreement and have explained them to all other family member(s) accompanying me and my pet.
- Absent VDART'S gross negligence, I hereby agree to hold harmless all persons, organizations, corporations, or government agencies involved in the care and sheltering of my animal.
- I further agree to indemnify any persons or entities that may have suffered any loss or damage as a result of the care and sheltering of my animal, providing the loss or damage is not the result of VDART or said person/entity's gross negligence.

Owner's Name _____ (please print)

Owner's Signature: _____ Date: _____

Address: _____

Telephone: (_____) _____ Email: _____