

RiverDog Transportation Program
Release & Waive of Liability, Assumption of Risk, and Indemnity & Consent
Agreement
("Agreement")

IN CONSIDERATION of participating in any way in the RIVERDOG TRANSPORTATION PROGRAM ("RTP").

1. I ACKNOWLEDGE, agree, and represent that I UNDERSTAND the nature of the RIVERDOG TRANSPORTATION PROGRAM, that I am aware of the possible risks and dangers associated with my participation in the RTP. These risks include but are not limited to the following:

a) the risks associated with travel to and from our two location(s) to be boarded, including transportation provided by commercial and/or private motor vehicles.

b) the possibility of pet injury incurred while getting on or off (in or out of) the mode of transportation being used for the RTP.

2. In the event of any illness or injury, I hereby CONSENT to whatever medical treatment or hospital care from a licensed veterinary physician and/or surgeon as deemed necessary for the safety and welfare of my pet. It is understood that the resulting expenses will be the responsibility of the owner. (Whenever possible, attempts will be made to contact the owner prior to taking any medical action.)

3. I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE RiverDog, their respective administrators, directors, agents, officers, members, volunteers, and employees, and, if applicable, owner and lessors of premises on which the RTP takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without inducement or

assurance of any nature and intend it to be a 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 the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant

Street Address, City, State, Zip

Phone _____

Participant Signature _____

Date _____

In the event of illness or accident and if unable to contact above, please contact:

Name _____

Phone _____