PERMISSION AGREEMENT, RELEASE AND WAIVER OF LIABILITY

Winneshiek County Dog Project Classes

Participant Name: (print) ____________________________________________________________

Participant Age: __________________________________________________________________

Parent Name: (if participant is under 18) ________________________________________________

Location of Activity: __________________________________________________________________

Date of Activity: ____________________________________________________________________

Permission, Release and Waiver of Liability

This 4-H Event Release and Waiver of Liability shall be governed by and construed under the laws of the State of Iowa, which shall be the forum for any lawsuits arising from or incident to this Agreement.

I, ________________________________ (participant or parent or guardian if participant is under age 18) give my permission for the above named individuals to participate in the Winneshiek County Dog Project Classes Activities involving horses carry inherent risks and can be potentially dangerous despite all safety precautions.

Nature of Dog Training Events: A dog may behave in a manner that results in damages to property, a serious bodily injury, including death or permanent injury, to all project participants as well as others. Risks associated with the dog event may include but are not limited to injuries caused by biting, scratching, or attacking.

Inherent Risks and Dangers of Dog Training Events: I understand and appreciate the risks and dangers inherent when participating in dog events. The dog may react unpredictably to conditions, including but not limited to a sudden movement, loud noise, an unfamiliar environment, or the introduction of unfamiliar persons, animals, or objects. The dog also may react in a dangerous manner when a condition or treatment is considered hazardous to the welfare of the animal; a collision occurs with an object or animal; or a participant fails to exercise reasonable care, take adequate precautions or use adequate control including failing to maintain reasonable control of the dog or failing to act in a manner consistent with the person’s abilities.

Note: Under Iowa law, The owner of a dog shall be liable to an injured party for all damages done by the dog, when the dog is caught in the action of worrying, maiming, or killing a domestic animal, or when the dog is attacking or attempting to bite a person, except when the party damaged is doing an unlawful act, directly contributing to the injury. (Iowa Code Chapter 351)

***Please read additional information and provide signatures of permission on other side of this page.***
I hereby RELEASE FROM LIABILITY, IMDEMNIFY, and HOLD HARMLESS the State of Iowa, Board of Regents of the State of Iowa, Iowa State University, ISU Extension and Outreach, Winnebago County Agricultural Extension District, and Winnebago County Fair Board and any of the officers, servants, agents and employees of the above-mentioned entities (hereinafter referred to as RELEASEES) for any liability, claim and/or cause of action arising out of or related to any loss, damage or injury, including death, costs or other expenses or liabilities incurred by me and anyone accompanying me, (including minors I am responsible for during this event), that occurs as a result of my or my child’s voluntary participation in this program. This release, however, is not intended to release the above-mentioned RELEASEES from liability arising out of their sole negligence.

I authorize medical treatment deemed advisable by any licensed health care provider to relieve any injuries or illness while a participant or observer. I understand that a basic accident/injury insurance policy for enrolled members is provided and that that I am financially responsible for all medical treatment charges to the attending physicians or health care unit not covered by this policy.

BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY, I STATE THAT I HAVE READ AND UNDERSTAND THE CONDITIONS SET FORTH IN THIS RELEASE AND THAT I AGREE TO ALL CONDITIONS SET FORTH HEREIN, AND THAT I SIGN THIS VOLUNTARILY.

______________________________  ________________________________
Date                              Participant Name (please print)

______________________________
Participant Signature

______________________________
Signature of Parent or Guardian (if Participant is under age 18)

NOTE: This Agreement and Release and Waiver of Liability must be signed by both the participant and the participant’s legal guardian if the participant is not EIGHTEEN (18) YEARS OLD