



## Snout and About Field Trip Agreement

*Please Print Clearly*

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Alt. Phone Number: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

*Thank you for your interest in walking and socializing our dogs. Please read and abide by the following rules and initial each line AFTER reading.*

\_\_\_\_\_ I am 18 years of age or older.

\_\_\_\_\_ Dogs can only be walked by individuals that have signed both the agreement and waiver.

\_\_\_\_\_ Dogs must remain leashed at all times. Dogs are not permitted to be in any off-leash areas including (but not limited to) dog parks and popular off-leash areas of local beaches.

\_\_\_\_\_ Dogs must not be introduced to unfamiliar animals-No direct or nose-to-nose contact.

\_\_\_\_\_ I will avoid using my cell phone or other devices that alter my ability to hear and be aware of my surroundings at all times while chaperoning.

\_\_\_\_\_ I will respect the needs of others and the businesses/locations we are visiting.

\_\_\_\_\_ I will not leave the dog unattended in my vehicle.

\_\_\_\_\_ I understand that CAS dogs must be returned to the shelter no later than one hour prior to the close of visitation hours and that if I fail to do so without notifying CAS staff, I may not be able to participate in the Snout and About Field Trip program again.

***By signing below I further affirm to abide by the rules listed above and certify that I have never been convicted of animal cruelty, neglect, or abandonment.***

\_\_\_\_\_  
Chaperone Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CAS Witness Print

\_\_\_\_\_  
Date

**Animal Services Unit**

2100 S. Military Hwy.  
Chesapeake, VA 23320  
757-382-8080  
Fax 757-961-1574

**RELEASE**

I, \_\_\_\_\_ (print name), volunteer to take animals from Chesapeake Animal Services' animal shelter on outings from time to time, to provide the animals a break from shelter living, obtain information about the animals' behavior while on the outing, and increase the animals' exposure to others who might be interested in adopting them.

I represent that I am at least 18 years old, that I am familiar with the handling of animals, and I have executed this Release as my voluntary act, intending to bind myself, my heirs and executors. I am aware that contact with animals could pose a potentially serious risk of injury, death or property damage. I understand that accidents may happen, and I knowingly and voluntarily accept the risk of injury, death or property damage in taking the animals on the outings. I hereby release the City of Chesapeake, Chesapeake Animal Services Unit, and their employees, agents and officials, from liability for any injury, death or property damage that may occur while the animals are in my possession. I also indemnify and hold harmless the City of Chesapeake, Chesapeake Animal Services Unit, and their employees, agents and officials, for any injuries or property damage I may cause while I am taking the animals on the outings.

I, \_\_\_\_\_ (print name), have never been convicted of animal cruelty, neglect, or abandonment.

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**CAS Representative Witness:** \_\_\_\_\_