



808B - REQUEST FORM FOR AN ANIMAL VISIT

This form is to be completed by the owner or handler of an animal requesting to visit Big Lake Schools. Please turn in your request to the Building Administrator/ Director.

Handler/Owner Name: _____ Date: _____

Phone: _____ Email: _____

Big Lake Schools Building: _____

Type/Breed of Animal: _____

Name of Animal: _____

Name of Employee Sponsor (if applicable): _____

Reason/purpose for the animal request:

Frequency of animal(s) on site:

Qualifications and Experience:

Checklist for Completion of Form:

- ___ Attached is documentation that the animal is properly licensed
- ___ Attached is documentation that the animal is properly and currently vaccinated
- ___ Attached is a copy of the owners' current homeowner's, renter's, business, or certified therapy animal insurance policy that covers possible damage or injury to people and property.
- ___ If the request is for animal therapy, the therapy dog and handler must be certified through official therapy dog organizations such as: Helping and Healing Paws, Pet Partners, or Therapy Dog International. The organization must carry insurance for the dog and handler. A copy of this current therapy animal identification and certification card, and their insurance must be attached to this form, as well be available at all times when on school premises.
- ___ The owner(s) agree that:

a. The animal must show visible cleanliness with no signs of fleas and/or ticks.

b. They will maintain certification of proper inoculations verified by a veterinarian and/or accrediting agency. This includes, but is not limited to: rabies, distemper, hepatitis, parvovirus, healthy stool sample analysis, proof of heartworm test, and proof of physical. If this list of needed inoculations becomes out-of-date or there is an alternative list of inoculations per a specific type of animal, proof of this from a veterinarian will be reviewed.

Signatures for Responsibility:

I have read and understand the School District's policy regarding animals and will abide by the terms of the policy. I understand that if my animal: is out of control and/or the animal's handler does not effectively control the animal's behavior; is not housebroken; the animal's presence or behavior fundamentally interferes in the functions of the School District; behaves in a way that poses a direct threat to the health or safety of others, has a history of such behavior; or otherwise poses a direct threat to the health and safety of others that cannot be eliminated by reasonable modifications, the School District has the discretion to exclude or remove my animal from its property. I agree to be responsible for any and all damage to School District property, personal property, and any injuries to individuals caused by my animal. I agree to indemnify, defend, and hold harmless the School District, its school board members, administrators, employees, and agents, from and against any and all claims, actions, suits, judgments, and demands brought by any party arising on account of, or in connection with, any activity of or damage caused by my animal.

Handler/Owner Signature: _____ Date: _____

Note: Animals will not be allowed on school premises until the district has received all information from the requester, and it has been approved with all signatures. This Registration/Agreement is valid until the end of the current school year. It must be renewed prior to the start of each subsequent school year or whenever a different animal will be used.