

**Acceptance of Responsibility for Guide Dog/Service Dog/Service Animal**

Student Name \_\_\_\_\_

DOB \_\_\_\_\_

OEN \_\_\_\_\_

As parents/guardians:

I/we accept all financial responsibility for the guide dog/service animal including ongoing training, care, and handling costs.

I/we also accept any liability which may arise from the animal's behavior.

I/we accept that the care of the animal is not the responsibility of Board staff, nor is it acceptable for Board staff to assume this on a volunteer basis during their scheduled work period.

The name of the trained handler who is responsible for the animal's care needs at the school is

\_\_\_\_\_.

\_\_\_\_\_  
Parent/Guardian Name                      Parent/Guardian Signature                      Date

\_\_\_\_\_  
Witness Name                      Witness Signature                      Date