

# BE AN ANGEL THERAPY DOGS MINISTRY, INC.

## DOG / HANDLER TEAM MEMBERSHIP APPLICATION

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### HANDLER'S INFO:

Name: \_\_\_\_\_  
Last Name First Name

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

### DOG'S INFO:

Name & Breed: \_\_\_\_\_ DOB: \_\_\_\_\_

Any Special Designations: \_\_\_\_\_

Any Special Needs for the Dog: \_\_\_\_\_

### BAA GEAR PACKAGE:

Shirt Type:  Polo with  Short Sleeves  Long Sleeves  
 Button Down with  Short Sleeves  ¾ Sleeves  Long Sleeves

Size:  Ladies  Small  Med  Large  XLarge  2XLarge  
 Men's  Small  Med  Large  XLarge  2XLarge (add \$2.00)  
 3XLarge (men's only) (add \$4.00)

**Vest Measurements:** Length \_\_\_\_\_ Girth: \_\_\_\_\_ Breast/chest: \_\_\_\_\_  
Use the attached measuring instructions.

**Cost of the BAA Gear Package: \$60.00** includes 1 shirt, 1 vest and 1 photo ID badge & Lanyard  
Note: if you are ordering oversized shirts add \$ to the package costs.

**Shipping: . . . \$5.00** (if you will need the package mailed to you, please add the \$5.00 shipping to your fee) = **\$65.00**

**Please remit to:** Be an Angel Therapy Dogs Ministry, Inc.  
104 Whippoorwill Drive, Altamonte Springs, FL 32701

### GEAR REPLACEMENT OR ADDITIONAL:

Shirts: \$30.00 - Vests: \$25.00 - Photo ID Badges: \$5.00 - Lanyard: \$9.00 Shipping: \$5.00

By joining Be an Angel Therapy Dogs Ministry, Inc. I understand that I will be expected to follow all the rules, regulations, and guidelines as established by Alliance of Therapy Dogs, which may be amended from time to time.

\_\_\_\_\_initial(s)

I understand that the liability insurance provided as part of my dues to ATD will not provide coverage for me and/or my dog, but only the person or persons who are or may be the injured party. I understand I will be responsible for all costs related to injury to myself, my property and/or my dog.

\_\_\_\_\_initial(s)

If any of the terms or conditions of my membership with ATD ***are not followed*** while representing them in any way, and an incident occurs, the liability insurance will become null and void and have no force or effect. The result is, I shall solely be liable for any and all costs related to the defense or settlement of any actions taken against me.

\_\_\_\_\_initial(s)

I further understand that the annual renewal for ATD must be kept current. If the annual renewal lapses and if an incident should occur, I understand that the liability insurance will become null and void and have no force or effect. The result is, I shall solely be liable for any and all costs related to the defense or settlement of any actions taken against me.

\_\_\_\_\_initial(s)

I agree not to name or implicate Be an Angel Therapy Dogs Ministry, Inc. in any suits or legal actions concerning me and/or my dog if I or we become a party to any action resulting in liability to an injured party.

\_\_\_\_\_initial(s)

I agree to ***commit to participate in one visit per month*** at a facility which has been ***previously arranged*** with Be an Angel Therapy Dogs Ministry, Inc. to the best of my ability. BAA has over 65 venues that we need to cover each and every month, so that means all teams will be needed to participate to fulfill the commitments made.

\_\_\_\_\_initial(s)

I agree to ***wear the Be an Angel Therapy Dogs Ministry, Inc. blue gear*** (shirt, dog's vest, lanyard, photo ID badge & badge holder) when representing them at a visit, or other special event where BAA shall be present.

\_\_\_\_\_initial(s)

I agree to ***provide a copy of the Alliance of Therapy Dogs registration card***, upon my annual renewal (December or June), to Be an Angel Therapy Dogs Ministry, Inc. to show that I am a member in good standing, therefore, renewal fees are paid and liability insurance is in force.

\_\_\_\_\_initial(s)

I agree to adhere to all the rules and regulations set down by Alliance of Therapy Dogs, especially the following:

2 ft distance between teams at all times - never a face-to-face contact with dogs – 4 ft leash or shorter – never allow the dog to walk in front of you, always keep dog beside you with a short leash – always leave the premises the way you found it, clean up after your dog – your visit begins when you come on site and ends when you leave the site, dog must be leashed at all times– for a visit have available your current ATD registration/membership card, copy of current rabies certificate, have the red heartshaped tag attached to collar or leash – when not working (ie walking dog, or on vacation with dog) remove the red heart shaped tag.

Note: This is just a short list. These conditions have been established for a reason, lets keep everyone safe.

\_\_\_\_\_ initial(s)

I agree to pay the **membership application fee of \$60.00 to Be an Angel Therapy Dogs Ministry, Inc.** for the BAA blue gear (shirt, dog's vest, photo ID badge & lanyard) upon submission of the BAA membership application.

\_\_\_\_\_ initial(s)

I agree to pay an **annual membership renewal fee of \$30.00 to Be an Angel Therapy Dogs Ministry, Inc. on either December 31st and June 30th** (coincides with the RENEWAL dates for ATD membership)

\_\_\_\_\_ initial(s)

I understand my insurance is not enforce if I have not received, from Alliance of Therapy Dogs, my renewed registration/membership card for the current year. Due dates are Dec 31<sup>st</sup> and June 30th. I agree to submit my renewal request upon receiving notice of renewal from ATD.

Therefore, I understand I cannot visit until receiving the new registration/membership card from ATD, as I will be without liability insurance during that time. **The membership either expires on Dec 31st and or June 30<sup>th</sup>.**

\_\_\_\_\_ initial (s)


### **HOLD HARMLESS**

I, \_\_\_\_\_, assume responsibility for my actions, for the actions of my family or guests and the actions of my dog. I hereby agree to protect, indemnify, defend and hold harmless **Be an Angel Therapy Dogs Ministry, Inc.** and any of its affiliates and subsidiaries, the officers, directors, agents and partners against all claims, demands, losses, or damages to person or property, governmental charges or fines, including any attorney's fees and costs arising out of or caused by my actions or in actions, the actions or inactions of my family or guests and the actions or inactions of my dog as it relates to the **Be an Angel Therapy Dogs Ministry, Inc.**

Important Information needed:

**Include a copy of your 2018 ATD Registration Card** (not the certificate)

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\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Print Name

  
\_\_\_\_\_  
Date