OWNER AGREEMENT

Jefferson County Horse Council ~ PO Box 1177 ~ Golden, CO 80402-1177 ~ www.JeffcoHorse.com

WARNING

UNDER COLORADO LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES PURSUANT TO SECTION 13-21-119 COLORADO REVISED STATUES.

IT IS HEREBY AGREED TO AS FOLLOWS:

- 1. Jefferson County Horse Council Large Animal Evacuation Team is strictly a volunteer organization comprised of people from the horse industry. No one is paid for his/her time. Our objective is to provide short-term/temporary housing for large animals that are on standby evacuation or have been evacuated from their property.
- 2. FOR SECURITY No one is allowed near the evacuated animals without a visitor pass or ID badge. Animal owners will be allowed with visitor passes only. Owners must check in daily at the office to receive a pass and check for updates or messages. Management and volunteers have clearly visible ID badges.
- 3. Our top priority is the SAFETY AND WELFARE of the animals in our care. They arrive under stressful conditions and are in unfamiliar surroundings. Not knowing the animals' background, horses will be provided with grass hay and water only. Other animals will be fed according to their needs. Owners may care for their own animals but no special feed can be kept on premises. Feed times are 8:00 a.m. and 5:00 p.m. If you are feeding your horse, yourself, please feed on our schedule. Owners only may exercise, groom and supplement their animals. Volunteers cannot. Barn hours are 8:00 a.m. to 7:00 p.m. Exceptions will be considered for medical care & emergencies only.
- **4.** If an animal becomes sick or injured a veterinarian will be called. Only a veterinarian will be able to prescribe medication and only barn managers or owners may administer medicines. **Veterinarians must authorize the administering of any medication by barn managers if veterinarians/owners cannot do it!**
- 5. <u>ANIMAL RELEASE:</u> Owners are responsible for their animal(s) return transportation. Animal(s) may be released during the hours of 8:00 a.m. to 7:00 p.m. You must provide proof of ownership and a photo I. D. in the office before your animal(s) will be released. Be advised, evacuated animals are impounded and are under the care and custody of the Jefferson County Sheriff's Office.
- 6. Remember that we are all volunteers helping in a crisis situation. If you have any questions, comments, or concerns, please see a manager. For the safety of all people and animals, managers have the final authority over all shelter operations and decisions. If you disagree with the care and housing provided for your animal(s), you may checkout your animal(s) from the shelter and make alternative boarding arrangements. Housing and feed for the animal(s) are provided to you at no cost. Any additional expenses, which may occur, are the owner's responsibility. If you would like to volunteer, please speak to someone in the office. You may make contributions to Jefferson County Horse Council Emergency Evacuation Fund, and you may mail your contribution to the above address or give it to someone in the office.
- 7. The owner hereby indemnifies and agrees to save harmless against The Jefferson County Horse Council, it's officers, agents, employees and/or volunteer staff from any and all loss, damage, expense and or penalty on account of any injury or death to the owner's person, horse/animal or property of any character whatsoever which may happen or occur on or about the evacuation stables or property. The owner further releases the Jefferson County Horse Council; it's officers, agents, employees and/or volunteer staff from any loss or injury to owner's person, horse/animal, or property due to fire, theft, illness, and/or accident.

I have read this document. I understand that it is for <u>short term/temporary housing</u> for large animals that are on standby evacuation, or have been evacuated from their property. My signature below constitutes I have read, agree and fully understand the above agreement.

OWNER(S) SIGNATURE(S):			
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NAME(S):			*
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE/DAY ()	EVENING (OTHER (_)