

**MONROE COUNTY  
HUMANE ASSOCIATION**  
CLINIC • EDUCATION • OUTREACH

**THERAPY ANIMAL PROGRAM  
VOLUNTEER AGREEMENT**

**Section 1: Volunteer Waiver**

I certify that I will adhere to all standards and meet all the requirements for a therapy animal team at the time of my registration, including, but not limited to:

- Both my animal and I meet the eligibility requirements specified by the Monroe County Humane Association's (MCHA) Therapy Animal Program.
- I will assume full responsibility for ensuring the safety and well-being of both myself and my animal at all times during our participation in the Monroe County Humane Association's Therapy Animal Program, including during transit to and from program locations.
- I am committed to maintaining the highest standards of health, grooming, training, and overall quality of life for my animal. This includes regular veterinary check-ups, ensuring proper hygiene and grooming, providing consistent training for behavioral excellence, and ensuring my animal's well-being and happiness both in and out of service.
- I have completed the required Therapy Animal Handler Training Course.
- While volunteering for the Monroe County Humane Association, I pledge to treat my animal with the utmost humanity, compassion, and respect. This includes providing appropriate care, ensuring comfort, and avoiding any forms of harsh treatment or neglect.
- My animal has a documented history of non-aggressive behavior towards both humans and other animals, has never caused serious injury or death to another companion animal, and has not been trained in biting techniques for any purpose, including dog sports or personal protection.
- My animal is consistently house-trained, exhibiting proper elimination habits and refraining from inappropriate elimination in both public and private settings.
- I acknowledge and commit to fulfilling a minimum annual service requirement of 10 hours as part of a registered therapy team with the Monroe County Humane Association.

I further commit to actively collaborate with the Monroe County Humane Association to participate in various MCHA-sponsored events and programs throughout the calendar year, thereby contributing to the organization's community engagement and impact.

- I will adhere to the program's guidelines on the duration of each therapy visit, specifically, not exceeding 2 hours for a single session and a total of 4 hours within a 24-hour period.
- Whenever my animal and I are engaged in animal-assisted activities or therapies, I will properly identify both of us as accredited members of the MCHA Therapy Animal Program, in accordance with the protocols detailed in the Therapy Animal Program Volunteer Handbook.
- I pledge to maintain a professional demeanor and strictly adhere to the latest version of the Monroe County Humane Association's (MCHA) Therapy Animal Volunteer Handbook Policies and Procedures. Should my animal's behavior at any time during a visit not align with these policies, I commit to immediately terminating the session to prevent any potential trauma to clients or incidents.
- I acknowledge my responsibility to keep all contact details and animal health records current, diligently report my volunteer hours monthly, and promptly respond to all communications from MCHA.
- I am aware that my participation in the program, including therapy visits, must be suspended immediately upon the expiration of my team's registration, pending renewal.
- I commit to promptly reporting any incidents that occur while volunteering, directly to MCHA within 24 hours of the occurrence, for proper documentation and action.
- I understand and accept that MCHA bears no legal responsibility for any actions undertaken by me or my animal during our tenure as a registered therapy animal team.
- I recognize that MCHA reserves the right to discontinue my participation or that of my animal in the program for various reasons, including but not limited to: acquiring criminal charges, repeated failure to comply with MCHA guidelines, not meeting behavioral requirements, receiving multiple complaints, or if it's determined by MCHA that we are no longer a good fit for the program.

## **Section 2: Insurance**

- The insurance coverage provided includes both General Liability and Professional Liability, each with limits of up to \$1,000,000.
- The policy offers protection and financial coverage for any physical injuries caused by a dog during officially reported volunteer hours, as well as lost wages resulting from such injuries.

- Please note that this insurance policy does not provide coverage for claims related to 'damages' or emotional pain and suffering.
- If a volunteer is found liable for injuring another individual, the policy covers medical expenses for the injured party up to \$1,000,000.
- It's important to clarify that neither this policy nor any other MCHA insurance policy provides coverage for medical injuries sustained by volunteers.

### **Section 3: Photo Release**

\_\_\_\_\_ (Initial) I hereby grant the Monroe County Humane Association the unrestricted right to capture and use photographs and/or video footage of me, my dependents, and my animal(s) for the express purposes of promotion, fundraising, and education. These materials may be used across various media channels to advocate for animal welfare and raise awareness. In doing so, I release the Monroe County Humane Association, as well as its officers, directors, and agents, from any liability or financial obligations associated with the utilization of such photographs or video footage.

Handler's Name: \_\_\_\_\_

Handler's Signature: \_\_\_\_\_

Date: \_\_\_\_\_