## **Service Animal Request**

## **Basic Information Animal Health**

| By check    | ing each requirement below you are confirming the information provided is correct:   |
|-------------|--|
| $\square$ S | ervice Animal is vaccinated for rabies   |
| D           | Pate of last vaccination   |
| D           | Pate of vaccination expires in the dog   |
|             | o my Knowledge, Service Animal does not have fleas or ticks or a disease that would endanger people or ther animals.   |
| V           | eterinarian's Name   |
| V           | Veterinarian's Phone #   |
| Animal T    | Training and Behavior  |
| $\square$ S | ervice Animal has been trained to do work or perform tasks to assist me with my disability.  |
| A           | nimal Trainer/Training Org Name  |
| A           | nimal Trainer/Training Org Phone #   |
| Service a   | nimal training and behavior declaration options  |
| $\square$ S | ervice Animal has been trained to behave in a public setting.  |
| tr          | understand that a properly trained dog remains under the control of its handler. I understand that a properly rained dog does not act aggressively by biting, barking, jumping, lunging, or injuring people or other nimals. It does not urinate or defecate on church property. |
|             | understand that if Service Animal shows that it has not been properly trained to behave in public, then it hall be removed immediately.  |
|             | to the best of my knowledge, Service Animal has not behaved aggressively or caused serious injury to nother person/dog.  |
|             | ☐ Yes ☐ No / Not Sure  |
| Other As    | surance  |
|             | understand that Service Animal must be harnessed, leashed, or tethered at all times while on church roperty.   |
|             | understand that if Service Animal causes damage, then the church may charge me for the cost to repair it, a ong as the church would also charge passengers without disabilities to repair the similar kinds of damage.   |
|             | My answers are true to the best of my knowledge. I understand that if I knowingly make false statements on his document, I can be subject to fines and other penalties.  |
| Signature   |  |
| Printed N   | ame Date   |