

Responsible Party Information	
Facility Name:	
Owner/Employer Name:	Phone:
Employee/Animal Care Taker Name:	_ Phone:
Agreement	
I confirm my commitment to the highest standards of agreeing that proper animal care is the responsibilities around animals, including me. I understand that an harm and mishandling are unacceptable and will no immediately report any signs of deliberate animal at mishandling to a supervisor or other individual(s) resort proper animal care.	y of every individual who nimal abuse, neglect, t be tolerated. I will buse, neglect, harm or
Owner/Employer Signature:	Date:
Employee/Animal Care Taker Signature:	Date:

