



SERVICE DOG CONSENT FORM

***A service dog should be individually trained to do work or perform tasks for the benefit of a person with a disability, including physical, sensory, psychiatric, intellectual, or other mental disabilities, regardless of breed.**

SERVICE DOG AND USER/HANDLER'S INFORMATION

Service Dog Handler's Name: _____

Telephone: _____

Service Dog User's Name (If different from handler): _____

Telephone: _____

Email: _____

Dog's Name: _____

Breed: _____

Weight: _____ Kg

Height: _____ Length: _____ Width: _____

HEALTH CONDITION OF SERVICE DOG

☐ (Dog's Name) is vaccination for rabies.

Date of last vaccination: _____

Vaccination expiry date: _____

☐ To my knowledge, (Dog's Name) does not have fleas or ticks of a disease that would endanger people or other animals.

Veterinarian's Name (no signature required): _____

Telephone: _____

SERVICE DOG TRAINING AND BEHAVIOR

☐ (Dog's Name) has been trained to do work or perform tasks to assist me with my disability.

☐ (Dog's Name) has been trained to behave in a public setting.

☐ I understand that a properly trained dog remains under the control of its handler. also, trained dog dose not act aggressively by biting, barking, jumping, lunging, or injuring people or other animals. It also does not urinate or defecate on the aircraft or in the gate area.

OTHERS

☐ I understand that(Dog's Name)must be harnessed, leashed, or tethered at all times in the airport and on the aircraft.

☐ I understand that if(Dog's Name)causes damage, ZIPAIR may charge me for the cost to repair it, as long as ZIPAIR would also charge passengers without disabilities to repair the similar kind of damage.

☐ I understand that if (Dog's Name) is found not to be trained to behave properly in public, ZIPAIR will treat (Dog's Name) as a pet and therefore (Dog's Name) may not board ZIPAIR flights as a service dog.

☐ I understand that I am committing fraud by knowingly making false statements to secure disability accommodations provided under the regulations of Canadian Accessible Transportation for Persons with Disabilities Regulations(ATPDR).

Signature of Service Dog User/Handler:_____

Date:_____