

ACKNOWLEDGMENT, CONSENT, INDEMNIFICATION AND WAIVER

I, _____, (the “Owner”), consent to the drawing of blood by needle, collection of blood cells through swabbing, and/or the collection of urine (the “Collection”), from my Scottish Deerhound(s) _____ (PRINT DOG’S CALL NAME(S)) for use in research studies being conducted by the Scottish Deerhound Club of America, the University of Pennsylvania School of Veterinary Medicine, Washington State University College of Veterinary Medicine, Nationwide Children’s Hospital, the National Institutes of Health, and the Canine Health Information Center (CHIC).

In connection with the above-described Collection, I hereby save, release, hold harmless and indemnify the Scottish Deerhound Club of America (the “SDCA”), its officers and members, including specifically the committee members and co-show chairs of the 2023 SDCA National Specialty and SDCA Health and Genetics Committee, for all claims, losses, demands, damages, actions, causes of action or suits of any kind or nature whatsoever resulting from or related to all aspects of the Collection.

I acknowledge that my participation in this Collection is voluntary and I affirm that I am the legal owner of the above-identified Scottish Deerhound(s).

Executed this ____ day of _____, 2023.

“Owner”

_____ (Printed Name)