

SCPRA Doggie Dip Registration Form - Please submit upon entry

Dog's Name(s) _____

Owner's Name _____

Address _____

E-mail Address _____

Phone _____

Vet's Name and Phone Number _____

Waiver:

I waive and release all rights and claim for damage against the organizers or anyone else associated with the Doggie Dip, for any injuries suffered by me or my dog as a result of taking part in the day's activities. I will be responsible for the conduct of my dog(s), keeping him/her leashed at all times while on the pool deck, and cleaning up after my pet. I will not bring a female dog in heat or a dog known to be aggressive toward people or other dogs. I certify that my dog is up to date on vaccinations and has a current dog license. I understand that the pool water is not chlorinated, and that entering the water is discouraged because of associated health risks, but should I choose to enter the pool I am doing so at my own discretion and risk.

Signature of Dog's Owner _____ Date _____

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