MONMOUTH COUNTY SPCA

20TH ANNIVERSARY DOG WALK & PET FAIR

1993 2013

CORPORATE PARTNER RED BANK VETERINARY HOSPITAL

OCTOBER 5TH

10AM–3PM

BROOKDALE COMMUNITY COLLEGE IN LINCROFT, NJ

20 YEARS OF PAWS WALKING FOR A CAUSE!

Please submit form with payment to: **MCSPCA DOG WALK • PO BOX 93 • EATONTOWN, NJ 07724**

REGISTRATION FORM

SAVE TIME AND REGISTER ONLINE AT MCSPCADOGWALK.ORG

NAME: .....

ADDRESS: ..... CITY • STATE • ZIP: .....

EMAIL / PHONE #: .....

WALKING THE WALK?

I AM WALKING AS A: ■ TEAM MEMBER ■ INDIVIDUAL

TEAM NAME: .....

TEAM LEADER: .....

TEAMS ARE ENCOURAGED TO RAISE A MINIMUM OF $250 IN PLEDGES.

BRINGING A DOG?

ALL DOGS <WALKING OR NOT> MUST BE REGISTERED IN ORDER TO ATTEND. REGISTRATION IS PER DOG.

- COLLECT OR DONATE A MINIMUM OF $25 PRIOR TO THE EVENT
- PAY A $30 ADMISSION FEE ON THE DAY OF THE EVENT

THIS ENSURES THAT EACH DOG HAS GONE THROUGH THE REQUIRED SCREENING PROCESS. ALL DOGS WILL RECEIVE A 2013 DOG WALK DOGGIE BANDANA AS PROOF OF ADMISSION.

DOGS MUST BE UP TO DATE ON ALL SHOTS AND WEAR CURRENT RABIES TAG OR BRING PROOF OF RABIES VACCINATIONS WITH THEM ON THE DAY OF THE EVENT IN ORDER TO ATTEND.

FOR A COMPLETE LIST OF RULES, PLEASE VISIT OUR DOG WALK WEBSITE AT MCSPCADOGWALK.ORG

PAYMENT OPTIONS

- ENCLOSED IS A CHECK IN THE AMOUNT OF $ ..... MADE PAYABLE TO THE MCSPCA DOG WALK.
- PLEASE CHARGE MY: ■ VISA ■ MASTERCARD ■ DISCOVER FOR THE AMOUNT OF $ ..... EXP DATE ☐☐/☐☐

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WAIVER: I UNDERSTAND THAT PARTICIPATING IN THE MONMOUTH COUNTY SPCA PET FAIR & DOG WALK INCLUDES AN ELEMENT OF RISK FOR BOTH ME AND MY DOG. I SHOULD NOT PARTICIPATE UNLESS MY DOG AND I ARE PHYSICALLY ABLE AND PROPERLY CONDITIONED. I AGREE TO ABIDE BY ANY DECISION OF AN EVENT OFFICIAL RELEVANT TO THE DOG'S AND MY ABILITY TO COMPLETE THIS EVENT SAFELY, AND I FURTHER AGREE THAT EVENT OFFICIALS MAY AUTHORIZE NECESSARY EMERGENCY TREATMENT FOR ME AND/OR MY DOG. I ALSO UNDERSTAND THAT BOTH VEHICLE TRAFFIC AND SPECTATORS MAY BE PRESENT AT THE EVENT AND I ASSUME THE RISK OF PARTICIPATING UNDER SUCH CONDITIONS. I FURTHER ASSUME ANY AND ALL OTHER RISKS ASSOCIATED WITH PARTICIPATING IN THIS EVENT, INCLUDING, BUT NOT LIMITED TO, ILLNESS, FALLS, CONTACT WITH SPECTATORS, OTHER PARTICIPANTS OR DOGS, THE EFFECTS OF THE WEATHER, INCLUDING EXTREME TEMPERATURE AND HUMIDITY, AND THE SURFACE CONDITION OF THE ROADS, SIDEWALKS, AND FOOTPATHS, ALL SUCH RISKS BEING UNDERSTOOD AND APPRECIATED BY ME. I ALSO AFFIRM THAT THE DOG I WILL BE PARTICIPATING WITH HAS CURRENT RABIES VACCINATIONS. I AGREE TO ABIDE BY ALL RULES OF THE EVENT.

HAVING READ THIS WAIVER AND KNOWING THESE FACTS, AND IN CONSIDERATION OF THIS ACCEPTANCE OF THIS ENTRY, I HEREBY FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS OR ANYONE ELSE WHO MIGHT CLAIM ON MY BEHALF, COVENANT NOT TO SUE, AND WAIVE, RELEASE AND DISCHARGE THE MONMOUTH COUNTY SPCA, BROOKDALE COMMUNITY COLLEGE, EVENT OFFICIALS, VOLUNTEERS, AND ANY OTHER SPONSORS, SUPPLIERS, AGENTS, INDEPENDENT CONTRACTORS, EMPLOYEES AND OTHER PERSONNEL IN ANY WAY ASSISTING OR CONNECTED WITH THIS EVENT FROM ANY CLAIMS OR LIABILITY OF ANY KIND WHATSOEVER ARISING OUT OF MY PARTICIPATING IN THIS EVENT, EVEN THOUGH THE LIABILITY MAY ARISE OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF THE PERSONS OR PARTIES NAMED IN THIS WAIVER.

I ALSO UNDERSTAND THAT THE MONMOUTH COUNTY SPCA OR ANY SPONSOR MAY SUBSEQUENTLY USE, FOR PUBLICITY OR PROMOTIONAL PURPOSE, MY NAME OR PICTURES OF ME, MY CHILD OR MY PET WITHOUT LIABILITY OR OBLIGATION TO ME. *BY SIGNING THIS DOCUMENT, I AGREE TO ALL TERMS AND CONDITIONS OF THE WAIVER AND INDEMNIFICATIONS ABOVE MY SIGNATURE. UNSIGNED ENTRIES WILL NOT BE ACCEPTED.*

SIGNATURE ..... DATE .....

QUESTIONS? STEPHANIE@MONMOUTHCOUNTYSPCA.ORG

732.440.1558 MCSPCADOGWALK.ORG