DOG PARK
MEMBERSHIP APPLICATION

$40 (Resident) or $55 (Non-Resident) for a one year membership; up to 3 dogs.
A fee of $10.00 will be applied for additional dog(s)
Submit full payment, signed liability waiver, updated
rabies and bordetella, and proof of spay/neuter with this application

January 1, 2019 – December 31st 2019

Please Print

Owner's Name(s): _____

Street Address: _____

Apt #: _____City:_____Zip Code:_____

Home Phone: _____Cell Phone: _____

E-Mail Address: _____
(Members will receive notifications about the Dog Park)

Dog #1 Name: _____Age: _____Breed: _____

Sex: M / F Spay/Neuter: Y/ N Color: _____Weight _____

Dog #2 Name: _____Age: _____ Breed: _____

Sex: M / F Spay/Neuter: Y/ N Color: _____Weight_____

Dog #3 Name: _____Age: _____ Breed: _____

Sex: M / F Spay/Neuter: Y/ N Color: _____Weight_____

I have signed the attached Acceptance of Risk and Release of Liability Form and have read and agree to the Dog Park rules provided. Tags are non-transferable. All dogs must recede in household listed above.

_____Signature _____Date

Office Use Only

Dog #1 Name: _____ _____ _____ _____
Expiration Date/ Rabies | Expiration Date/Bordetella | Tag #

Dog #2 Name: _____ _____ _____ _____
Expiration Date/ Rabies | Expiration Date/Bordetella | Tag #

Dog #3 Name: _____ _____ _____ _____
Expiration Date/ Rabies | Expiration Date/Bordetella | Tag #

Number of Dogs: _____

Total Fee Paid: _____Check #: _____ Cash: _____Visa / Master Card / Discover

Initial:_____ Date: _____