PARTICIPANT REGISTRATION

Dog Gone Easter Bone Hunt Saturday, March 24, 2018 event begins at 11:45am (rain or shine) at Childers Dog Park in Monroe, GA. You may sign up your pet(s) the day of the event. On-site registration begins at 10:30am and ends at 11:15am. We encourage all pet owners to join the fun. You must register before your pet can participate in any of the events. All proceeds will benefit the Childers Dog Park of Monroe, GA. Thank you for your support!

| PET SUPERVISOR/PET OWNER | 'S NAME: | |
|--|--|--|
| EMAIL: | PHONE: | |
| ADDRESS | | |
| #1 PET'S NAME: | BREED: | AGE: |
| #2 PET'S NAME: | BREED: | AGE: |
| #3 PET'S NAME: | BREED: | AGE: |
| | \$5.00 Donation p | oer Dog |
| (Paymen | t by cash or check only. Please make cl | hecks payable to Monroe DDA) |
| | TOTAL DONATION: \$ | |
| | - | gree to take full responsibility for my persons, Care Hospital or the City of Monroe responsible |
| for any loss, damage, or injur | y to my persons, animals, property, or | merchandise. I am aware that event coordinators rvision shows any signs of aggression towards any |
| current on other vaccines and my care. 3. I plan to take new water, and a safe distance fro All dogs must be under contro | be free of any contagious illnesses. 2 essary precautions for the safety of pm other animals should there be any | a current Rabies vaccination. My pet should be I am responsible for cleaning up after the pets in ets in my care such as providing proper ventilation, medical or personal concerns for pet's safety. 4. ept on a leash with one dog per handler. 5. I must me (excludes raffle drawing). |
| Signature | | Date: |
| Registrants are required to sig | n and turn in this form BEFORE particip | pating in any of the dog events. Please bring this |

form along with you or complete one prior to the start of the event.