

DROOL IN THE POOL DOG REGISTRATION

Owner's Name: _____

Owner's Email: _____

Owner's Address: _____

Dog's name and breed/description: _____

PARTICIPANT ACKNOWLEDGEMENT AND AGREEMENT

By registering for and attending this event, I acknowledge that I have read, understand, and agree to comply with the following requirements:

1. I will pay the required \$5 admission fee for each dog attending the event.
2. I understand that all dogs outside the water must remain on a leash at all times. Retractable leashes are not permitted.
3. I certify that each dog attending is at least six (6) months of age and has been spayed or neutered.
4. I certify that each dog is current on all required vaccinations and that I will provide written proof of current vaccinations upon request.

I understand that failure to comply with these requirements may result in removal from the event without a refund.

PARKS AND RECREATION PROGRAM WAIVER

The undersigned is the adult program participant, or is the parent or legal guardian of the program participant. The undersigned hereby states that s/he understands the activities that will take place in this program, and that the program participant is physically and mentally able to participate in this program. The undersigned recognizes, as with any activity, there is risk of injury. In the event that the program participant sustains an injury in the course of the program, and the Bloomington Parks and Recreation Department is unable to contact the appropriate person(s) to obtain consent for treatment, the Department and/or its employees or volunteers are authorized to take reasonable steps to obtain appropriate medical treatment. The program participant and/or his/her parent or legal guardian shall be responsible for the cost of such treatment. The undersigned now releases the City of Bloomington, the Bloomington Parks and Recreation Department, its employees, agents, and assigns, from any claims including, but not limited to, personal injuries or damage to property caused by or having any relation to this activity. It is understood that the release applies to any present or future injuries and that it binds the undersigned, undersigned's spouse, heirs, executors and administrators.

The program participant, and/or the parent or legal guardian of the program participant, understands and acknowledges that the program participant may be photographed and videotaped while participating in Parks and Recreation activities and/or while attending Parks and Recreation events. The program participant, and/or the parent or legal guardian of the program participant, hereby provides consent for the inclusion and/or reproduction of such photos or videos for advertising and publicity purposes.

The undersigned voluntarily agrees to assume all of the foregoing risks, known and unknown, and accept sole responsibility for any injury or loss to the program participant, and other members of the program participant's household. The undersigned hereby waives, releases, discharges, and agrees to hold harmless, indemnify, and not sue Bloomington Parks and Recreation Department, its employees, agents, officers, directors, affiliates, members, volunteers, and representatives (collectively, "Releasees"), of and from any and all claims, liabilities, actions, damages, costs or expenses of any kind arising out of or relating thereto. The undersigned further agrees that this release includes any Claims based on the actions, omissions, or negligence of the Releasees, whether such claim arises before, during, or after participation in any Parks and Recreation program.

I have read and understand all of the foregoing terms. I agree with the terms and sign voluntarily.

Owner's Signature: _____

Date: _____

☐ My dog's current vaccination records have been verified by a Bloomington Animal Care and Control officer.

_____ Animal Care and Control Officer initials