

Animal Rescue Foundation of Louisiana, Inc.

{A 501(c) 3 Non-Profit Organization, TAX ID# 72-1442548}

"Dog Days of Summer" Doggie Contest and Olympic Games Registration

APPLICANT INFORMATION

Full Name: Last _____ First _____ M.I. _____
Street Address: _____ Apartment/Unit # _____
City: _____ State: _____ ZIP Code _____
Home Phone: () _____ Cell Phone: () _____
Email _____
Have you participated in 'Dog Days of Summer' Doggie Contest and Summer Olympics ☐ YES ☐ NO
How did you hear about our event? _____

ABOUT YOUR DOG

Dogs Name: _____ Dog Breed? _____ Dogs Age: _____
☐ Male ☐ Female Dog Handler's Name: _____
Size: (Height at shoulder) ☐ up to 12" **SMALL** ☐ 13" - 23" **MEDIUM** ☐ 24" and up **LARGE**

WHICH EVENTS ARE YOU ENTERING

Please check the corresponding boxes to the categories you would like to participate in.
Each category costs \$4 per participating dog or \$25 per dog for unlimited entries.

Contest Categories

- | | |
|-----------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> BEST "BIKINI" | <input type="checkbox"/> DUNKING FOR (HOT) DOGS |
| <input type="checkbox"/> BEST "SUMMER OUTFIT" | <input type="checkbox"/> LEAVE IT |
| <input type="checkbox"/> BEST TRICK | <input type="checkbox"/> MUSICAL HOOPS |
| <input type="checkbox"/> DOG-OWNER LOOK ALIKE | <input type="checkbox"/> PEANUT BUTTER LICK |

ENTRY FEES

Total # of Events: _____ #
X \$4 per Event (or \$25 for unlimited events) = _____ \$

PAYMENT

☐ Check Enclosed ☐ Visa ☐ MasterCard

Card # _____ Expiration Date: _____
PRINT Name: _____ Signature: _____

Read and Sign:

I certify that my dog has current immunizations for rabies and any other immunizations recommended by my veterinarian, that I own my dog, and that I know of no sign or symptom that suggest my dog is currently ill or carrying a disease or illness communicable to humans or other dogs. Please initial here: _____

I hereby register my dog in the 'Dog Days of Summer' Doggie Contest and Olympic Games being conducted by the *Animal Rescue Foundation of Louisiana, Inc.* I hereby declare on behalf of myself, my heirs, my executors, my administrators and my assigns that I will not hold the *Animal Rescue Foundation of Louisiana, Inc.*, its employees, volunteers or any other sponsors responsible for any injuries I or my dog or my dog's family handler named above may occur while participating in, or as a result of said *Animal Rescue Foundation of Louisiana, Inc.* and that I hereby release each and all of them from liability claims therefore. I further certify that if the dog's handler is under age of 18, that I am the handler's legal guardian/parent, and that I have read the foregoing waiver and release, understand its contents, and hereby agree to the release contained therein on behalf of the registered minor and of the registered minor's parents/legal guardian.

I grant full permission to use any photographs, videotapes, recordings or any other record of this event for any purpose.
I certify that I am (18) eighteen years of age or older, and I have read this document and understand its contents.

Signature: _____ Date: _____
Handler's Signature: _____ Date: _____

****The proceeds from this event will benefit the *Animal Rescue Foundation of Louisiana, Inc.* ****