

**American Cancer Society
Bark For Life of Staten Island
April 29, 2012**



AMERICAN CANCER SOCIETY
BARK FOR LIFE™
A CANINE EVENT TO FIGHT CANCER

Participant Registration and Waiver Form

(Required for all Team Members, One form per participant; multiple dogs may be registered together as a family unit)

PLEASE PRINT ALL INFORMATION

Team Name: _____
Team Captain: _____
Owner's Name: _____
Canine Name/Names _____
Address: _____ City: _____ State: _____ Zip: _____
This is my address at: Home Work (please check one)
Home Phone: () _____ Cell Phone: () _____
I prefer to be contacted at: Home Cell
Emergency Contact Name & contact info: _____
E-mail Address: _____ I am 18 years old or under: No ___ Yes ___
Age: _____
Employer: _____
Will your employer match your donations? Yes ___ No ___

Participation Fee: _____ enclosed is the participation fee.

Please make check out to the American Cancer Society. Cash or credit cards also accepted.

\$10 for a walker without a dog- advanced registration

\$20 for a walker without a dog- onsite registration

\$20 for a walker with one(1) dog-advanced registration

\$30 for walker with one (1) dog- onsite registration

\$30 for a walker with two(2) dogs- advanced registration

\$40 for a walker with two (2) dogs- onsite registration

Credit Card Information (Optional)

Name as it appear on credit card: _____

Credit Card #: _____

Card Type: _____ Expiration Date: _____

WAIVER: Each dog owner MUST read and sign.

- Leashes are a maximum of 6'
- Dogs should be leashed at all times
- Dogs must be current on all shots
- All dogs' space must be respected
- Owners must be prepared to "pick up" after their dogs
- As a participant in Relay For Life, I, for myself, my executor, administrators, and assigns, do hereby release and discharge the American Cancer Society, the event site, their management, their officers, members, sponsors, organizers, or their representatives, or their successors, and all cooperating businesses and organizations from all claims of damages, demands, actions, and causes whatsoever, in any manner arising or growing out of my participation or that of my dog/dogs in this event.
- I understand that I may be photographed, filmed or videotaped at the event. I hereby irrevocably grant to ACS, its affiliates, licensees and collaborators the absolute right and permission to use my likeness and/or voice for any purpose whatsoever, including commercial advertising. I hereby release, discharge and agree to save harmless ACS and its employees or agents, affiliates, legal representatives or assigns and all persons acting under its permission or upon its authority or for whom it is acting, from any liability by virtue of any publication of my likeness, including, without limitation, claims for libel or invasion of privacy.
- I also give my full permission for such first aid as is deemed necessary to be provided to me or my dog/dogs on the premises or prior to transport to a medical facility for further treatment.

Participant Signature: _____ **Date:** ____/____/____
(Signature of parent or legal guardian if human participant is under 18)

Mail to: American Cancer Society, Attn: Bark For Life, 173 Old Town Road, Staten Island, NY 10305