Mutt Strut 2016 Registration

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dog’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was this dog adopted from Chasing Daylight? \_\_\_\_\_\_\_\_\_

Rabies tag # and expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt size: Small Medium Large Extra large

Registration fee: $15 by May 1, $2o after May 1

Make checks payable to CDAS

All dogs must be wearing a collar with ID tag, and on a non-retractable leash. All dogs must be altered and current on rabies vaccination.

Waiver / Release form: In consideration of acceptance of this entry, I, on behalf of myself, my heirs, executors and administrators, hereby waive and release all rights and claims of any nature I ( or my child if I am signing as a parent ) may have against Chasing Daylight Animal Shelter, the City of Tomah and all of their supporters, sponsors, employees and representatives for all injuries or death which I (or my child or my pet) may suffer in this walk , or arising from participation in the walk or activities surrounding the event. Additionally, I will allow free use of my name and photograph (or that of my child or pet) for broadcast or print if taken to publicize this event. I am (or my child is) physically fit and sufficiently trained for this event. I am and will remain responsible for my animals or any animals participating with me (or my child).

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Parent’s signature if under 18 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail to: Chasing Daylight Animal Shelter

 15560 Hwy 131

 Tomah, WI 54660