

**SOMERS DOG PARK REGISTRATION FORM**

**OWNER INFORMATION 1**

First Name	Last Name	Gender Male/Female
Home Phone		
Cell Phone		
E Mail		
Mailing Address		
Emergency Contact Name	Phone	
Vehicle – Make, Model, Color, Plate #		

**OWNER INFORMATION 2**

First Name	Last Name	Gender Male/Female
Cell Phone		
E Mail		
Vehicle – Make, Model, Color, Plate #		

**DOG 1**

Name	Breed	Male/Female
Age	Weight	Spayed/Neutered
Town License # Exp Date	Rabies Shot Date Exp Date	

**DOG 2**

Name	Breed	Male/Female
Age	Weight	Spayed/Neutered
Town License # Exp Date	Rabies Shot Date Exp Date	

**DOG 3**

Name	Breed	Male/Female
Age	Weight	Spayed/Neutered
Town License # Exp Date	Rabies Shot Date Exp Date	

**LEGAL LIABILITY**

Any person bringing a dog into this facility assumes the legal responsibility, jointly and severally, with the owner of the dog, for any damage, disease or injury to persons, other dogs or property, caused by the dog. All persons using the facility, by entering it, agree to indemnify the Town of Somers and hold the Town harmless for any harm resulting from the use of this facility.

I have received read and agree to abide by the parks rules and regulations. I understand that failure to abide by these rules will result in loss of park privileges, forfeiture of fees and may result in legal penalties.

Owner 1 Signature	Date
Owner 2 Signature	Date

**Office use only**

Vehicle 1 Permit #	Vehicle 2 Permit #
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