

2018 BARNEGAT LIGHT DOG PARK ACCESS CARD "PAW-PASS" APPLICATION FORM

Assigned Access Card # _____

ANNUAL BARNEGAT LIGHT LICENSED DOGS	ANNUAL NON-BARNEGAT LIGHT LICENSED DOGS	WEEKLY NON-BARNEGAT LIGHT LICENSED DOGS
FREE WITH ANNUAL DOG LICENSE	\$30.00 FEE	\$15.00 FEE

**Dog Park Access Swipe Cards shall be issued to new applicants.
Original Swipe Cards shall be reactivated upon renewal each year.
Lost Swipe Cards may be replaced at a cost of \$15.00.**

EXPIRES 1/31/19

Name of Owner: _____

Local Address: _____

Telephone #: _____ Cell Phone #: _____ E-mail: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

ACKNOWLEDGEMENT OF RISK & RELEASE OF LIABILITY

I do hereby acknowledge that unleashing my dog and being physically present at the dog park area involves risks of injuries to me, any individual accompanying me, other persons, my dog, other dogs, and other risks, including but not limited to the risks resulting from aggressive dogs, unpredictable behavior and/or lack of proper dog training. I further understand that there is a risk that not all dogs present in the dog park are licensed and vaccinated for rabies as required by law, despite the rules of Barnegat Light, which could result in injury to person or animal. Additional risks include dog fights, dog bites, theft or unlawful capture of animals, escape over or under dog park fences or through open gates, unhealthy or poisonous vegetation or standing waters, burrs or seeds that may become lodged in the dog's coat, feet, eyes, nose or ears, mosquitoes, insects, and other wildlife in and around the dog park. I understand that use of the dog park is to be monitored by me and is not supervised by the Borough of Barnegat Light. Additionally, **I accept and acknowledge that I assume any and all risks associated with the usage of the dog park.**

By signing this application form, I hereby agree to release, indemnify and hold harmless the Borough of Barnegat Light from and against all loss, cost, damage, expense and liability resulting from my use of the dog park, including death, sickness, injury and disease to any person or dog, or destruction to property, real or personal, arising directly or indirectly from my use of the dog park. I do hereby acknowledge that I have read and fully understand and agree with the terms outlined above. I further acknowledge that I have reviewed the dog park rules and regulations for dog park use and agree to abide by the same.

Print name _____

Signature _____

Date _____

Dog # 1

Name: _____ Breed: _____ Weight: _____

Color(s) _____ Sex: _____ Spayed/Neutered: _____ Age: _____

License #: _____ Expiration Date: _____

Issuing Municipality: _____

Rabies #: _____ Expiration Date: _____

Dog # 2

Name: _____ Breed: _____ Weight: _____

Color(s) _____ Sex: _____ Spayed/Neutered: _____ Age: _____

License #: _____ Expiration Date: _____

Issuing Municipality: _____

Rabies #: _____ Expiration Date: _____

(FOR OFFICIAL USE)

FEE PAID: \$ _____ CHECK #: _____ CASH: _____ DATE ISSUED: ____/____/____ EXPIRATION: ____/____/____