



WestieWalk - 2010

Saturday, October 9th

Rain Date Saturday, October 16, 2010



Pre-Registration Form

To receive medallion necklaces for your dogs, pre-register by 9/24/10

Please make your check payable to W.O.O.F. and mail it along with your form to:

WestieWalk

2081 Fishinger Rd, Columbus, OH 43221-1246

Suggested Donations:

1 Dog \$15

2+ Dogs \$25

I am unable to attend but would like to make a donation. Please find my check enclosed.

Owner(s) Name: _____

Address: _____
Street City State Zip

email: _____

Home Phone: _____ Cell/office (circle one) Phone: _____

<u>Dog Name(s) *</u>	<u>Westie</u>	<u>Other Breed</u>	<u>Rescue?</u>
_____	___ Yes	_____	___ Yes
_____	___ Yes	_____	___ Yes
_____	___ Yes	_____	___ Yes

* Please list names exactly the way you would like them in the program (maximum of 20 characters)

Please Read Carefully and Sign:

I grant permission to W.O.O.F., WestieWalk and any other agencies participating in this event to use any photographs, videos, or other recordings/reproductions of my animal(s), myself, or minors accompanying me for any promotional purpose without obligation or liability.

I understand that any participant under the age of 13 must be accompanied by an adult 18 or over. The adult will act as the supervisor of the minor, and will be responsible for the minor's safety and well-being during the WestieWalk event.

My animal(s) have been properly registered and have current vaccinations.

My animal(s) and I and any minors accompanying me are in proper physical condition to participate in WestieWalk 2010.

I assume full responsibility for myself and the welfare and control of my animal(s) and minors accompanying me at all times during the event.

I release and discharge W.O.O.F., WestieWalk, the City of Gahanna, all sponsors, all vendors, all volunteers and any other participating agency from any claims, liabilities, or causes of action I may have as a result of participating in this event, either foreseen or unforeseen.

Participant / Owner signature _____ date _____

Participant / Co-Owner Signature _____ date _____