

PAWS WARS

EPISODE III: REVENGE OF THE BOONE

ENTRY FORM

Owner's Name: _____

Address: _____

Phone: (daytime) _____ (evening) _____

In case of an emergency, please contact: _____

Emergency contact number(s): _____

Dog's Name: _____

Age: _____ Breed: _____

Has your dog received vaccinations? Please circle: Yes/No.

If Yes, when/where did your dog receive his/her last vaccination?

Is your dog spayed or neutered? Please circle: Yes / No.

If No, why not? _____

Please check the categories you would like to enroll your dog in:

- | | |
|--|---|
| <input type="checkbox"/> Star Wars Character | <input type="checkbox"/> Booniest |
| <input type="checkbox"/> Fattest | <input type="checkbox"/> Most Disobedient |
| <input type="checkbox"/> Most Talented | <input type="checkbox"/> Best in Show |



PAWS

Pet Assistance and Welfare Services

Rules of the Dog Show:

“PAWS Wars: Episode III: Revenge of the Boonie”

I agree to abide by and comply with the following rules of the Best of the Worst Dog Show:

1. My Dog(s) is/are properly fitted with a collar and leash, as required.
2. I will pick up my dog's poop as a courtesy to others and dispose of it in the trashcans provided on the property.
3. I agree to remove my dog(s) from the CPA property if my dog(s) act aggressively towards other people and/or dogs, pose a safety risk to other people and/or dogs, and/or appear to be unhealthy, giving rise to health concerns.
4. I agree to sign the Waiver of Liability, releasing PAWS, Beautify CNMI volunteers, Agents, students, and sponsors of any and all liability. Failure to sign the Waiver of Liability will preclude my dog(s) from attending and/or participating in the dog show.
5. PAWS and Beautify CNMI, and their volunteers, agents, and sponsors, reserve the right to ask any person and their animal to leave the dog show at any time for any reason.

By signing this document, I acknowledge that I have read and understood the above rules, and that I agree to comply with these rules for the safety of others, myself, and my animal(s).

Name: _____ Date: _____
(Please print your name)

Signature: _____
(Please sign here)

Waiver of Liability

“PAWS Wars: Episode III: Revenge of the Boonie”

I, _____, am responsible for (name of dog(s)

_____ . By signing this waiver, I release, indemnify, and hold harmless PAWS, Beautify CNMI!, CPA, volunteer workers, students, and all other person and or sponsors of the Best of the Worst Dog Show from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my/my child's/my family's/my dog's attendance or participation in the Best of the Worst Dog Show on June 13, 2009 at the CPA Airport Football Field.

I recognize that I am solely responsible for any harm, injury, personal injury, illness, or damage caused by my dog(s). I agree that PAWS, Beautify CNMI!, volunteers, agents, and sponsors do not assume any liability or responsibility whatsoever for any harm, injury, personal injury, illness, or damaged caused by my dog(s).

I recognize that attending and/or participating in the dog show is an activity that presents some risk of injury and/or illness. I agree that my/my child's/my family's/my dog's safety is primarily my responsibility, and not that of PAWS, Beautify CNMI!, CPA, volunteers, or any other person or sponsor of the Best of the Worst Dog Show.

I also recognize that the coordinators, PAWS Board Members, Beautify CNMI! volunteers, students, and agents of the show assume no liability whatsoever for personal injuries, injuries to my animal, or property damage that may arise from my attendance of and/or participation in the dog show.

My signature on this form indicates that I have read, understood, and freely signed this agreement. My signature also recognizes that I have read, understood, and freely signed the rules of the dog show and agree to comply with those rules. I expressly agree that this agreement shall be construed and enforced in accordance with the laws of the CNMI.

I agree that this waiver and release is intended to be as broad and inclusive as permitted under the CNMI laws so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

_____ Date: _____
(Name of Attendee of Participant. Please Print.)

(Signature of Attendee or Participant)

Signed in the presence of _____ Date: _____
(Name of PAWS/Beautify CNMI Volunteer)