



Presents

6th Annual Walk, Wag, & Swim

- Who: You and your dog(s)
- What: Dog walk, prizes, events, and a swim (sorry, only the dogs can swim.)
- Where: Draper Outdoor Pool at 657 Vestry Rd.
- When: Saturday Sept. 18, 2010
- Schedule: 8:45am- Walk starts
 9:00am- Police Dog Demo
 9:00- 10:30am- First swim starts
 10:45- 11:15am- Big Air diving contest
 11:30am- 1:00pm- Second swim starts
 All Day- Course a Lure in the park
- Cost: Walk and swim is \$12 for the first dog
 Second swim is \$10 for the first dog
Each additional dog is \$5, with a max of three dogs per person
 Big Air contest is \$1 per dog with a max of 20 dogs in event (pre-registration requested)
 Course a Lure is paid separately the day of the event (4 runs for \$20)
- Why: Raise money for No More Homeless Pets, have fun, and win prizes
 Also, each registered participant will get a bandana for their dog, and a t-shirt for themselves



Don't let your dogs miss out on the social event of the season! Space is limited, so pre-registration is requested. For more information, call 495-1445, or 495-1480.

Register at Dimple Dell Rec Center, Draper Pool, or you can mail your registration form with a check to:

Southeast Advisory Board
10670 South 1000 East
Sandy, UT 84094
Attn: Shelley



6th Annual Walk, Wag, and Swim

Presented by
Dimple Dell Recreation Center
Salt Lake County
The Dog Lodge
Mountain View Animal Hospital
No More Homeless Pets

Please mark your choices:

Walk and first swim (8:45am) 1 Dog (\$12) _____ 2 Dogs (\$17) _____ 3 Dogs (\$22) _____

Second Swim (no walk) (11:30am) 1 Dog (\$10) _____ 2 Dogs (\$15) _____ 3 Dogs (\$20) _____

Big Air Contest \$1 per dog (10:45am) _____ (please include number of dogs if more than one entering)

Total fee included with registration form \$ _____ Shirt Size _____

Make Checks payable to: Southeast Advisory Board

Mail to: Southeast Advisory Board
10670 South 1000 East
Sandy, UT 84094
Attn: Shelley

REGISTRATION FORM:

Owners Name _____

Address _____ City _____ State _____ Zip _____

Home phone _____ Cell phone _____

In case of emergency notify _____ Phone _____

Name of veterinarian _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

- Release:** I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly release, waive, and discharge Salt Lake County, its officers and employees from any and all liability except that caused solely by the negligence of Salt Lake County, that may result from my child's participation in Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.
- Refund:** As per Salt Lake County policy and procedures, the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.
- Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake Attorney for collection.
- Emergency Treatment:** I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. I understand that I or my insurance company will be billed for such emergency treatment.
- Equal Opportunity:** Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will upon request, provide reasonable accommodations to individuals with disabilities.
- By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms.

Signature (Parent or Legal Guardian): _____ Date _____