



**THE CITY OF SURPRISE, ARIZONA**  
16000 North Civic Center Plaza, Surprise, AZ 85374

## WAVIER OF LIABILITY – DOG DAY EVENTS

LAST NAME			FIRST NAME		M.I.		DATE OF BIRTH		GENDER M F		
STREET ADDRESS								CITY			
STATE/ZIP				PRIMARY CONTACT NUMBER				SECONDARY CONTACT NUMBER			
<b>EMAIL ADDRESS (OPTIONAL):</b> _____ <b>ADD ME TO THE E-NEWSLETTER TO</b> <b>RECEIVE INFO ABOUT FUTURE EVENTS</b> <input type="checkbox"/> No <input type="checkbox"/> Yes											
NUMBER OF DOGS IN ATTENDANCE:						DO YOU REQUIRE ACCOMMODATIONS? <input type="checkbox"/> No <input type="checkbox"/> Yes (IF YES, PLEASE DESCRIBE)					

In consideration of my being permitted to participate in the Spring Training Dog Day event, I hereby release and agree to hold harmless the City of Surprise, an Arizona municipal corporation, its elected and appointed officials, directors, agents, representatives, and employees, from any and all claims of any kind or character which I have or may have against them due to my participation, my child's or my dog(s) participation. I, the undersigned, fully understand and agree that I have voluntarily requested to participate in this event which will involve my attendance and the attendance of dog(s) of which I have custody. I understand that by participating in this event, my actions may result in anticipated and/or unanticipated injuries and damage to myself and others including my dog(s); as well as the dogs of others. I hereby represent that the dog(s) of which I have custody during the event is in good health and is of non-aggressive temperament. I confirm and assure that the dog(s) has current rabies vaccinations. This waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of this event. In that regard, I covenant to indemnify, defend, and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorneys' fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them. I understand and acknowledge that medical claims are my responsibility. This waiver/release of liability agreement shall apply to any right of action that might apply to me, my heirs, and my personal representatives. Further, I understand and agree to assume all risks and liability in participating in the Dog Day festivities. This waiver does not extend to any such claim or liability that is caused by the sole and exclusive gross negligence of the City of Surprise or its officers, employees or agents. I give my consent to the City to take photos/video of me, my child or my dog(s) during the Dog Day festivities to be used by the City for event promotion.

I hereby certify and represent that I have read the foregoing and fully understand the meaning and effect thereof.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE