



## City of Galesburg

Operating Under Council – Manager Government Since 1957

### ONE-DAY DOG PARK PASS APPLICATION

To apply for a one-day dog park pass the applicant must be at least 18 years of age and present dog's proof of current vaccinations to be considered.

One Day Pass # \_\_\_\_\_

Date \_\_\_\_\_

Name of Owner \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Name & Contact Number \_\_\_\_\_

Name of Dog \_\_\_\_\_ Breed of Dog \_\_\_\_\_

Age of Dog \_\_\_\_\_ Approximate Weight \_\_\_\_\_

Dog's Veterinarian and Phone Number \_\_\_\_\_

Identification (circle all that apply)    Collar Tag            Microchip

I (we) agree to hold the City of Galesburg, their staff, directors, officers, agents, volunteers, and employees harmless from any claim for loss or injury that may be alleged to have been caused directly or indirectly to any person or "thing" by act of other persons, owners, guardians, and/or their dog(s) while in or upon the grounds or near any entrance to the dog park and I (we) further agree to hold the aforementioned parties harmless from any claim for loss of our dog(s) by disappearance, theft, damage or injury, be caused or alleged to be caused by the negligence of the city of Galesburg or any of the parties aforementioned, or by the negligence of any other person, or any other cause or causes.



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I (we) understand that this application system is not to establish a guarantee that dogs in the Park are safe or healthy. I (we) also understand that dogs may act unpredictably in this environment. I (we) assume the risk of bodily injuries, including death for any person or persons, including myself (ourselves) arising from the use of the dog park. I (we) also will assume the risk of damage to property arising out of consequence of participation at the dog park.

I (we) understand that the dog park is an unsupervised facility and that no agent or employees of the City of Galesburg will supervise the off-leash area at any time and I therefore expressly assume responsibility for all risks associated with the Park as well as fixtures and equipment that may be located there in an unsupervised manner. Furthermore, I (we) will carefully inspect the facilities and satisfy myself (ourselves) that they are safe for their intended use. Once having conducted the inspection, I (we) agree to assume all risks for myself (ourselves), guardians, children, and my (our) dog(s) participating at the dog park. I knowingly accept the risks of indigenous plants, mosquitoes, ticks, chiggers, fleas, stray dogs, and wild animals, that may injure or infect both human and dog participants at the dog park.

By my (our) signature(s) below, I (we) hereby agree to indemnify and hold harmless the City of Galesburg, their staff, directors, officers, agents, volunteers, and employees, harmless from any claim or cause of action, judgment, claim for damages by any third party, including but not limited to the payment of any judgment and the incursion of any attorney fees by any of the foregoing entities or individuals, which may arise in any way due to my presence or use of the dog park, its grounds, its facilities, or any other aspect of my use of the dog park.

By my (our) signature below, I (we) state that I (we): 1-agree to the terms within 2-have received, read and fully understand the dog park Rules and Regulations ( and will explain them to any guests who may attend), 3-promise to comply with those rules and regulations and ensure any guests comply as well, and 4-have no knowledge of incidents in which my (our) dogs have shown aggression, fighting, or biting behaviors towards animals or people.

I (we) certify my dog(s) is (are) up-to-date on vaccinations, is parasite free, and in good health.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_