



Dog Park Association of Greater Lafayette  
Lafayette Parks and Recreation



# Lafayette's Annual POOCH PLUNGE Registration

A dog swim event at Castaway Bay Aquatic Center  
to support improvements at the Shamrock Dog Park.

**TUE, WED, THUR 5:00 – 8:00 PM Date: August 14 15 16**

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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

e-mail: \_\_\_\_\_

**Donation:** \$10 for the first dog, \$5 for an additional dog EACH NIGHT  
Payments accepted: CASH / CHECK / CHARGE )  
Present **PAPER proof of rabies** and this signed registration form for entry.

Dog Information	NAME	BREED	COLOR	SEX
Dog #1:				F M
Dog #2:				F M

**RELEASE FROM LIABILITY**

I hereby release and forever discharge *The Dog Park Association of Greater Lafayette, Lafayette Parks & Recreation, Lafayette Police Department*, and their directors, officers, agents, volunteers, successors, assigns, and landowners on which the POOCH PLUNGE dog swim event takes place, of and from all claims, actions, and demands whatsoever which I or any heirs and assigns can and may have, with respect to any injuries to me, my family members, or any pet(s), or damage to, or losses of, any property incurred in connection with or as a result of the POOCH PLUNGE dog swim event.

I verify that my participating dog is over 16 weeks old, and has a current rabies vaccination. I further verify that I am at least 18 years of age and agree that, during the event, I or another person aged 18 or older will at all times be in control of my participating dog(s). No persons under the age of 12 are allowed in the pool area. I also agree to abide by all rules of the event.

Participant Signature: \_\_\_\_\_ Day:   1     2     3  

Participant Signature: \_\_\_\_\_

Participant Signature: \_\_\_\_\_