## RELEASE AND WAIVER OF LIABILTY

By signing below I,	
X	
SIGNATURE PRINT NAM	E CLEARLY
voluntarily taking part in this event accident, loss, damage, or injury me.  With full knowledge of possible dangers, and intending to be legal of all my family, heirs, administrators, executors and assignees to residents, including but not limited to the owner of the property (he the activity is being conducted as well as the individuals conducting any cause of action, and NOT TO SUE OR OTHERWISE MAKE ANY of which may arise during my participation, along with my dog(s) in this I intend this RELEASE OF LIABILTY to be effective whether or not any of the Property Owners or Conductors and their staff. I understand careful person would do, or the doing of an act which a reason circumstances to protect him or herself, or others from accident, injury of the Activity, who is not affiliated with the Property Owners off responsibility to ascertain his/her credentials and certifications prior advice of and use the services of this service provider at my own risk	(hereinafter 'the Property') on the date(s) of ize danger to dogs, snakes and humans I understand that by ranging from minor to severe may result to either my dog(s) or ly bound, I hereby agree for myself and my dog(s) and on behalf RELEASE the Property and any of its representatives, owners, reinafter collectively referred to as "Property Owners") on which the training clinic from any and all liability, claims, demands or LAIMS against the Property Owners or Conductors whatsoever activity taking place on the above referenced date.  I loss, damage, injury or death RESULTS FROM THE NEGLIGENCE that negligence means a failure to do an act which a reasonably ably careful person would not do, under the same or similar tury or death. I understand that the contracted service provider the ers professional services to the public community, but it is my to engaging myself or my dog(s) in the Activity. I will follow the
I agree to be solely responsible for my own safety and that of my do and well being, and that of my dog(s) while participating in these Admy own assessment as to whether it is safe and free from all dopermitting the Conductors to hold the event at the Property and to to feel free to participate in this Activity without fear of liability. I further and that I am expected to have appropriate medical insurance in further medical bills will be submitted to my own insurance company.	ctivities, including inspecting all situations, equipment and make efects. This RELEASE AND WAIVER is given in the interest of enable my fellow dog owners, the Property Owners, and myself rther understand there is no insurance coverage for this Activity
My release is given in exchange for the ability to use the Property a <b>CLEARLY</b> .	nd the services for this Activity on the signed date. Please print
SIGNATURE	DATE
E mail:	Phone:
Dogs' names:	
By initialing here I give my consent for Gina Gables a	nd/or Ma & Paw Kennel to use my likeness, those of my

IF ANY PARTICIPANT	IS UNDER 18, PARENT OR GUARDIAN MUS	T SIGN BELOW
I am the legal guardi	an of	and have read the above application and RELEASE AND
WAIVER. I hereby co	onsent to the terms stated above and RELE	ASE AND WAIVER on behalf of named minor participant
and give my consent	to the participation of the above named m	inor in the Activity on the Property on the terms stated.
SIGNATURE	DATE	
	PARENT OR LEGAL GUARDIAN	