

TOWN OF CORTLANDT DOG PARK REGISTRATION



Name of Dog Owner: _____

Address: _____

Telephone Number: _____

Email Address: _____

Name of Dog (s): _____

Date of Vaccination Expirations: _____

Dog License
Number: _____

INJURY RELEASE: I agree, or agree on behalf of my minor child, to assume: (i) all risk of personal injury or loss; (ii) bodily injury; and (iii) damage to, loss of, or destruction of any personal property resulting from or arising out of participation in the designated activity. I also release, waive, indemnify, hold harmless, and discharge the Town of Cortlandt from all claims, damages, and injuries arising out of my or my minor child's activities, including my or my minor child's use of equipment and facilities provided by the Town of Cortlandt. By checking "I Accept" line below, you are signing this Agreement.

COVID-19 RELEASE: By participating in any programs sponsored by the Town of Cortlandt, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by my participation. I agree that if I am exposed to or infected by COVID-19 during my participation in any programs sponsored by the Town of Cortlandt, then my heirs, successors, assigns, and I have waived any right to maintain a lawsuit against the Town of Cortlandt for exposure to COVID-19, and my heirs, successors, assigns, and I shall hold the Town of Cortlandt harmless with respect to any damages incurred from contracting COVID-19. I acknowledge that I have read and fully understand the terms and conditions. By checking "I Accept" line below, you are signing this Agreement.

Owner's Signature

Date

Please mail the completed Dog Park Registration Form to Town of Cortlandt Town Hall: Town of Cortlandt Recreation Department, 1 Heady Street, Cortlandt Manor, NY 10567.

Please contact the Town of Cortlandt Recreation Department with any questions or concerns at tocrec@townofcortlandt.com or 914-734-1050.