



Tails on the Trail

5K RUN & 1-MILE WALK



REGISTRATION FORM

***ONE FORM
REQUIRED FOR EVERY
PARTICIPANT***

Deadline for early registration is Wednesday, June 14. *After June 14, registration will be accepted at the event for an increased fee of \$5 per participant type.

Participant Contact Information

FIRST NAME _____ LAST NAME _____ DOB ___/___/___ GENDER M F

ADDRESS _____

CITY _____ ST _____ ZIP _____ PHONE _____

EMAIL _____ # of dogs attending _____ (2 max per registered adult)

EVENT DAY EMERGENCY CONTACT _____

EVENT DAY EMERGENCY CONTACT PHONE _____ Relationship to participant: _____

T-SHIRT SIZE: S M L XL 2XL 3XL **T-shirt is included with each paid registration. Available in adult sizes only.**

WILL YOU & YOUR DOG PARTICIPATE IN OUR FASHION SHOW?(it's free!) YES NO AWARDS: Best Dressed, Most Creative & Best Look-a-like
IF YES: Dog name _____ Breed _____ Age _____ Costume idea _____

Participant Type: INDIVIDUAL TEAM Team name: _____
Team captain: _____

Registration Type (CHECK ONE)

<input type="checkbox"/> ADULT 16 and up	<input type="checkbox"/> YOUTH 6-15 years old	<input type="checkbox"/> CHILD 5 & under
<input type="checkbox"/> 5K RUN/WALK: \$30.00 (\$35 day-of)	<input type="checkbox"/> 5K RUN/WALK: \$20.00 (\$25 day-of)	<input type="checkbox"/> 5K: FREE
<input type="checkbox"/> 1 MILE WALK: \$25.00 (\$30 day-of)	<input type="checkbox"/> 1 MILE WALK: \$15.00 (\$20 day-of)	<input type="checkbox"/> 1 MILE WALK: FREE

Additional donation: \$250 (Spays/ neuters 5 dogs) \$100 (vaccinates 12 animals) \$25 (feeds 10 wild animals) \$10 (microchips 2 cats)

TOTAL PAYMENT \$ _____

Payment Method

Cash or Check made payable to **Wisconsin Humane Society** or WHS enclosed

Credit card VISA Card # _____ Exp. Date _____
 MC Signature _____

Terms & Waiver I understand that participating in the Wisconsin Humane Society's (WHS) Tails on the Trail 2017 on Saturday, June 24, 2017 at Veterans Park includes an element of risk both to myself and the dog(s) I have entered. I should not participate unless both the dog(s) and I are physically able and properly trained. I agree to abide by any decision of an event official relative to my, and my dog's, ability to compete in this event safely and further agree that event officials may authorize necessary emergency treatment for me or the dog(s). I also understand that, although police protection will be provided, both vehicle traffic and spectators may be present along the course and I assume the risk of participating under such conditions. I further assume any and all other risks associated with participating in this event including, but not limited to illness, traveling to and from the event, falls, contact with spectators or other participants or dogs, the effects of weather (including temperature extremes and humidity) and the surface condition of the roads, sidewalks and trails. All such risks being understood and appreciated by me. I also affirm that the dog(s) I will be participating with are currently licensed, with current Rabies (if over 4 months of age), Distemper, and Bordetella (kennel cough) vaccines before the walk. I further agree to abide by all the rules of participation in this event. Having read this waiver and knowing these facts, and in consideration of the acceptance of my entry, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge the Wisconsin Humane Society, the city of Milwaukee, event officials, volunteers and any and all other sponsors, suppliers, agents, independent contractors, employees and any other of negligence or carelessness on the part of the persons or parties named in this waiver. I also understand and agree that WHS and any sponsor may subsequently use, for publicity or promotional purposes, my name, information or image, without liability or obligation to me. Entries cannot be accepted without a valid signature. Entries from minors will only be accepted with a parent or legal guardian's signature.

Signature of participant or guardian _____ Date ___/___/___

For Tails on the Trail Questions: wihumane.org/tailsonthetrail • 414.431.6214 • tailsonthetrail@wihumane.org

Return forms to: WHS, Attn: Tails on the Trail, 4500 W. Wisconsin Ave., Milwaukee, WI 53208 or email at rlejeune@wihumane.org