



# AMERICAN CANCER SOCIETY BARK FOR LIFE™

## A CANINE EVENT TO FIGHT CANCER



*Please Print All Information*

Canine Owner's Name: \_\_\_\_\_

Canine Name/Names: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Canine Owner's Address: \_\_\_\_\_

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

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

\_\_\_\_\_ E-Mail \_\_\_\_\_

Canine Owner's Emergency Contact Name: \_\_\_\_\_

Are you age 18 years or under? Y\_\_ N\_\_

Canine Owner's Employer: \_\_\_\_\_ Will your employer match your donations? Y\_\_ N\_\_

*Commitment Fees:* \_\_\_\_\_ Number of canines registering \$ \_\_\_\_\_ Total commitment fees paid

**WAIVER:** Each canine owner **MUST** read and sign the waiver form on the back of this page.

Visit [RelayForLife.org](http://RelayForLife.org).

Celebrate. Remember. Fight Back.®



AMERICAN CANCER SOCIETY  
**BARK FOR LIFE**<sup>®</sup>  
 A CANINE EVENT TO FIGHT CANCER

**BARK FOR LIFE  
 REGISTRATION WAIVER**  
 Each Canine Owner **MUST** Read and Sign!

***Please read and acknowledge the waiver below. Thank you for your cooperation!***

As a participant in Bark For Life<sup>®</sup> (“Event”), I, for myself, my executor, administrators, heirs, devisees and assigns do hereby discharge the American Cancer Society, East Central Division, Inc., the event site, their management, officers, board members, employees, members, sponsors, volunteers, organizers, successors or their representatives, and all cooperating businesses and organizations from all claims of damages, demands, actions and causes whatsoever in any matter arising from or growing out of my participation or that of my child(ren) and/or dog(s) (“Bark Participant(s)”) in the Event.

I agree to indemnify the American Cancer Society, East Central Division, Inc. for all fines, fees and expenses incurred as a result of the breach of any contractual obligations by the Bark Participant.

I give my full permission to use and/or reproduce photographs taken of me for use in the publication, advertising, promotion or publicity of any of ACS’ programs, mission, and/or fund-raising events.

I also give my full permission for such first aid, as deemed necessary by the medical professionals at the Event, to be provided to me or my child on the premises or prior to transport to a hospital for further treatment.

\*\*\*If I am under the age of 18, my parents have consented to my participation at the American Cancer Society Bark For Life<sup>®</sup> event. When I am on the premises of the American Cancer Society, East Central Division, Inc. or at an American Cancer Society, East Central Division, Inc. sponsored event, my parents have agreed to all of the Bark Participant Donation and Solicitation Agreement Terms and Conditions on my behalf. I also agree to complete and return to my ACS, East Central staff partner the Youth Participant Waiver Form signed by myself and my parents.\*\*\*

**Content Disclaimer**

The American Cancer Society, East Central Division, Inc. does not exercise any editorial control over the information you may find on any Bark Participant Web pages (if applicable). Opinions expressed on Bark Participant Web pages do not necessarily represent the official views of the American Cancer Society, East Central Division, Inc.

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

*(Signature of parent or legal guardian if human participant is under 18)*

**Date:** \_\_\_\_\_

For ACS office use only

Date Entered: \_\_\_\_/\_\_\_\_/\_\_\_\_

Entered by: \_\_\_\_\_

*The official registration and financial information of the American Cancer Society, East Central Division, Inc. may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 800.732.0999. Registration does not imply endorsement. Ohio residents may call 717.783.1720.*