



AMERICAN CANCER SOCIETY
BARK FOR LIFE
A CANINE EVENT TO FIGHT CANCER

Canine & Human Registration

Nonrefundable payment for registration can be made via check, money order or credit card.

Oct 12, 2019

Amount Enclosed: _____ ****I am a cancer survivor** _____

**Jefferson Memorial
Funeral Home and Cemetery**

11:00 a.m. to 1:00 p.m.

Registration starts at 9AM

Registration: **\$25/dog** * (non-refundable)

Includes a t-shirt for owner & bandana for Dog

*Each dog must be accompanied by their own human at all times. (One-to-one for safety) **** Human Cancer Survivors can register one dog for NO charge.**

Owner's Name: _____ Dog's Name: _____

Company or Organization Name: _____

Phone: _____ Email: _____

Address: _____

Dog is a cancer survivor _____

Bandana Size

SM

LG

T-shirt Size XXL XL LG MED SM

(*Extra Shirts can be ordered. Indicate # and size: _____ @ \$15)

To guarantee receiving a special Bark For Life t-shirt, registration must be received by Sept. 27th, 2019 but registration will be accepted up to and including the day of the event.

Emergency Contact: _____ **Phone:** _____

All dogs will be screened as they check-in. We reserve the right to turn away any dogs that are a threat to other participants. Dogs in heat will be turned away. Dogs must be on a leash at all times. Owners are responsible for cleaning up after their dogs. Dogs must be current on their vaccinations. As a participant in the Bark For Life, I, for myself, my executor, administrators and assigns, do hereby release and discharge the American Cancer Society, the event site, their management, their officers, members, sponsors, organizers, volunteers or their representatives, or their successors, and all cooperating businesses and organizations from all claims of damages, demands, actions, and causes whatsoever, in any manner arising or growing out of my participation and that of my dog(s) in this event. I give my full permission for the use of my name and photographs in this event. I also give my full permission for such first aid as is deemed necessary to be provided to me or my dog(s) on the premises or prior to transport to a medical facility for further treatment.

Signature: _____ Date _____

Questions??? Call 412.655.4500 or email marketing@jeffersonmemorial.biz

Please charge my credit card for \$ _____

Name (as it appears on the card)

Card: MC Visa Amex c/o # _____ Exp. Date _____

Day time Phone: _____ Email Address _____

Email Address _____

**Return form & payment to: Jefferson Memorial /401 Curry Hollow Rd. Pittsburgh, PA. 15236
C/O - Clyde Callicott ... Please Note – For Jefferson Memorial Bark for Life Event**