* REAL OF	GU	GUARDIAN REVIVAL		
Annual Permit Required				
Membership begins each year o limit 3	n the first of January. \$25 per dog-	For Official Use: Application [<u> </u>
Applications & payments can be Veterans Memorial Park Office I		Dog License [Rabies Certificate [Drivers License Payment
Carmel, NY 10512. Please make "Commissioner of Finance"	checks payable to the	Annual Permit #(s)	Amount Method	
Lock Codes will be changed a	nnually and as needed	Dog Tag #(s)	Date Receipt #	
A copy of a current Dog License required for each dog.	AND a copy of rabies certificate are		Received E	
OWNER IN	FORMATION			
Last Name	First Name		Date of Birth	
Street Address		City	State	Zip
Phone	Email			
Additional household members	permitted to use access tag (must b	e 16+ years of age, reside in the s	ame house and i	nitial below.)
First Name	DOB	First Name		DOB

•			-	-	-	-

Last Name

Initial Here

DOG INFORMATION

Last Name

	Breed	DOB	Weight (Ibs.)	Age	🗋 Male		
H					Female		
1 #1	Name of Dog #1	Color(s)	Color(s)		itered?		
DOG				🗋 Yes	🗌 No		
Δ	Town Licensed In	License #	Exp. Date (attach)	Rabies exp.	Date (attach)		
Tag#	Has this dog ever displayed any a person?	Yes	🗌 No				
Putnam County Veterans Memorial Park, 201 Gipsy Trail Road, Carmel, NY 10512							

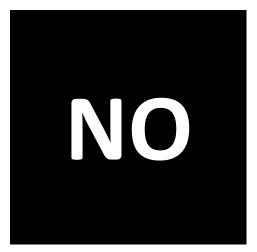
845-808-1994

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	Breed	DOB	Weight (lbs.)	Age	🔲 Male
2					Female
3 #2	Name of Dog #2	Color(s)		Spayed/Net	utered?
DOG				🗌 Yes	No No
	Town Licensed In	License #	Exp. Date (attach)	Rabies exp.	Date (attach)
Tag#	Has this dog ever displayed any a person?	aggressive behavior tow	ard another dog(s) or	Yes	🗌 No

	Breed	DOB	Weight (lbs.)	A	lge	🔲 Male
m						Female
1#3	Name of Dog #3	Color(s)			Spayed/Neu	itered?
DOG				C] Yes	🗌 No
	Town/State Licensed In	License #	Exp. Date (atta	ach)	Rabies exp.	Date (attach)
Tag#	Has this dog ever displayed any person?	aggressive behav	vior toward another dog(s)	or [Yes	🗌 No





RULES AND REGULATIONS

ALCOHOL OR TOBACCO PRODUCTS GUNS OR OTHER WEAPONS METAL DETECTORS GUM GLASS CONTAINERS FOOD OR DOG TREATS DRINKS (OTHER THAN WATER) NOISEMAKERS HOLE DIGGING BY THE DOGS OTHER ANIMALS IN THE DOG PARK EXCESSIVE BARKING OR AGGRESSIVE BEHAVIOR

Putnam County Guardian Dog Park may be closed at any time at the discretion of the Park Employees due to weather or events at Putnam County Veterans Memorial Park.

All other Putnam County Parks rules and regulations and municipal ordinances apply.

Signature

Date

CODE OF CONDUCT

- 1) In compliance with Putnam County Parks rules and regulations, an incident/bite report will be filed immediately for any incident involving bodily injury (broken skin) to person or dogs.
- 2) Use of the dog park shall be at the owner's risk. Putnam County, and Guardian Revival, Inc., are not responsible for any injury or damage caused by any dog in the dog park.
- 3) Any dog showing aggression or rough play toward people and/or other dogs must be immediately leashed and removed from the dog park by its owner/handler.
- 4) Owners are responsible for their dogs at all times. Dogs cannot be out of control, out of sight, or damaging the park in any way. Your dog must be non-aggressive and under voice command.
- 5) All dogs must be on a leash until inside the dog park common area. Please keep your leash with you at all times.
- 6) Dogs must have current license and immunization records on file with the Putnam County Park Office in order to visit and use the dog park. Acurrent copy of the owner's driver license must be on file with the Putnam County Park Office as well.
- 7) Once immunizations have expired, you have one week to update vaccinations and provide paperwork to the Office.
- 8) Owners/handlers must clean up pet waste, inside and outside of the dog park. Bags are provided inside the dog park. Please do not take extra bags for personal use.
- 9) Not permitted in the park: dogs in heat, puppies under 4 months old, and unattended children.
- 10) Limit 3 dogs per adult when visiting the dog park.
- 11) Dogs must be accompanied by aresponsible individual (16 years or older) at all times within the dog park; children under 16 must be accompanied by an adult.
- 12) Please place trash in the proper receptacles.
- 13) When entering and exiting the Dog Park the access road must always be used.

Signature

Date

PUTNAM COUNTY GUARDIAN DOG PARK **RELEASE AND HOLD HARMLESS AGREEMENT**

In consideration of the County of Putnam (the "COUNTY") granting permission to the undersigned to bring my dog(s) to the Putnam County Guardian Dog Park of the COUNTY, the undersigned hereby agrees to assume all liability and all risk of loss and shall be responsible for the supervision and welfare of all persons and/or dogs arriving on and/or using COUNTY property and/or facilities in connection with permit issued. The undersigned hereby acknowledges that I have voluntarily applied to participate and use Putnam County Guardian Dog Park and understand that the acts of unleashing my dog(s) or being physically present inside the Putnam County Guardian Dog Park necessarily involves risks of injury to me, other people, my dog(s) and other dogs, including but not limited to, risks resulting from aggressive or dangerous dogs, unpredictable behavior, lack of training, and lack of vaccination.

The undersigned hereby releases the County of Putnam, its officers, employees, servants, agents and enumerated volunteers from any liability for any injuries sustained, or damages incurred and to reimburse the COUNTY for any damages either arising out of or indirectly in connection with the undersigned's use of the County property and/or facilities. The undersigned hereby further agrees that i will indemnify and hold harmless Putnam County, its officers, employees, servants, agents and enumerated volunteers harmless from any liability or claims that may result from any use by me and/or my dog(s) of the COUNTY property and/or facilities arising out of this permit.

The undersigned represents that any dog listed on the application is at least (4) months old and has been licensed, de-wormed, vaccinated as required. The undersigned also represents that no dog listed on the application has exhibited aggressive or dangerous behavior and the undersigned has no personal knowledge that said dog(s) has ever bitten another person or dog.

DATE: _____ SIGNATURE: _____

(PLEASE PRINT CLEARLY) NAME:

COUNTY EMPLOYEE SIGNATURE: