



W O L F G A N G

WHERE MUTTS CAN STRUT

**PLEASE THOROUGHLY READ THROUGH THE INFORMATION BELOW AND
AUTHORIZE ELECTRONICALLY SIGN THE FORMS BEFORE YOUR FIRST EVENT**

Before participating in a WolfGang, LLC event, you must read, complete, and authorize the general liability waiver as well as the photo/video release forms. These forms will be kept on file until the end of the calendar year. You will be required to fill out a new waiver in the upcoming year. . A copy of these forms will be emailed to you, per your request but will be kept on file with WolfGang, LLC. Thank you!

Name (required)

First: _____ Last: _____

Email (required): _____

Phone Number (required): _____

Address (required): _____

City: _____ **State:** _____

Date (required): _____

***ALL DOG INFORMATION IS REQUIRED;**

Dog Name, sex, and breed: (if more than one that will participate in an event, please name them separately)

Is your dog neutered/spayed? YES / NO

Is your dog up-to-date on ALL vaccinations? YES / NO

Is your dog known to be non-vicious & able to participate in a public event? YES / NO

Veterinary Clinic Name: _____

VIDEO/PHOTOGRAPH RELEASE FORM

WolfGang, LLC would like permission from you to show pictures and videos of you participating with your dog in any of our events. This grants permission for the use of any photographs, motion pictures, recordings or videos of my participation in an event and that it will be used for legitimate purposes on our website, social media, promotional materials or any other similar purposes.

You agree that this is without compensation or payment from WolfGang, LLC.. I understand that my image may be edited, copied, exhibited, published, or distributed and I waive the right to inspect or approve the finished product. By signing this release, I understand this permission signifies that the photo or video may be electronically displayed. There is no time limit on the material. This also grants permission to any professional photographer we may hire for an event.

By signing this, I acknowledge that I have completely read and agree to the release.

PRINT NAME

SIGNATURE:

DATE

Print the name of parent/guardian if the participant is under the age of 18

DATE