



Saddlebrooke Dog Park Association Membership Renewal Form

Member Name(s) _____

Email address _____ Phone _____

Name of 1st Dog _____ Rabies Vaccination expires _____

Name of 2nd Dog _____ Rabies Vaccination expires _____

Name of 3rd Dog _____ Rabies Vaccination expires _____

It is your responsibility to submit updated proof of rabies information to **SDPA**. If the rabies vaccination has expired and you have not yet provided it, please include the new proof of vaccination certificate with this form.

Your \$65 membership renewal fee is due by January 31st.

Mail the renewal form and proof of rabies vaccination certificate if applicable to:

SDPA, PO Box 8415, Tucson, AZ 85738-0415.

Membership is non-refundable and non-transferable.

I agree to membership as written in the SDPA Bylaws. I understand that the small dog park area is restricted to dogs that are 30 pounds or less. I attest that I have read the dog park rules and etiquette document provided on the website, and that my membership is contingent on full compliance of these SDPA rules. The Board of Directors reserves the right as a body to revoke membership and deactivate the key card because of non-compliance to the rules and Bylaws. I agree that I am responsible for the conduct of my dog(s) or my guest's dog while in the park. All activity inside the park is "at your own risk" and the members, Board of Directors, and officers of the SaddleBrooke Dog Park Association will be held harmless for pet injury, injury to any person(s) or the loss of property.

Exclude me from the membership phone directory? Yes No

Signed: _____ Date: _____