



## SaddleBrooke Dog Park Association Temporary Membership Form

Name(s) \_\_\_\_\_

SaddleBrooke Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Permanent Address \_\_\_\_\_

Name of 1<sup>st</sup> Dog \_\_\_\_\_ Rabies vaccination expires \_\_\_\_\_

Name of 2<sup>nd</sup> Dog \_\_\_\_\_ Rabies vaccination expires \_\_\_\_\_

Name of 3<sup>rd</sup> Dog \_\_\_\_\_ Rabies vaccination expires \_\_\_\_\_

**Proof of current rabies vaccination is required for temporary membership.  
Contact for dog park entrance code is:**

I want use of park from: \_\_\_\_\_ to \_\_\_\_\_.

Cost is \$15 per month and is not prorated; key code will be terminated at the end of my paid membership.

Number of months at \$15 per month equals \_\_\_\_\_

**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, and that my membership is contingent on full compliance of these SDPA rules. I understand that the key code given to me cannot be shared with others. The Board of Directors reserves the right as a body to revoke membership because of non-compliance to the rules and Bylaws. I agree that I am responsible for the conduct of my dog(s) 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.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_