

Festival of the Senses

DOG PARADE

Where: Clinton Twp. Civic Center Grounds
 9:00am – Check-In 10:15am – Parade Begins
 10:45am – Winners Announced



\$5.00 registration fee benefiting **Macomb County Animal Control**
 \$7.00 registration fee day of event at the Civic Center Concession Stand.

Return completed form and payment (check made payable to "CTPR") to: CTPR,
 40700 Romeo Plank Rd., Clinton Twp., MI 48038

For more info visit www.ctfestivalofthesenses.org or 586-286-9336



PRIZES:

Best
 Costume

Best Trick

Owner
 Look-a-Like

Saturday, September 23, 2017

Name: _____
 Address: _____
 City: _____ Zip: _____
 Phone: _____ Email: _____
 Dog's Name: _____ Breed: _____

It is required that all animals be current on their annual vaccinations and kept on a 6' leash or in a carrier at all times. Pre-Registration is required. Please mail this form to CTPR 40700 Romeo Plank Rd Clinton Twp MI 48038

Please read and sign waiver/photo release: in consideration of being permitted to participate in the Festival of Senses Dog Parade, I hereby for myself, my heirs and personal representatives assume any and all risk which might be associated with this event. I further waive, release, discharge and covenant not to sue Clinton Township, its officers, employees, organizers, volunteers or other representatives, or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities. I also agree to the use of any photos, film, or videotape of the event of any purpose.

The signed waiver hereby gives the Township of Clinton, it assigns, licenses and legal representative the right to use my name, or photograph in all forms of media and in all manners which would be for the purposes of advertising and promotional intentions. I also waive any right to inspect or approve any finished product prior to publication.

Signature: _____ Date: _____

Weight
 Class

Circle One:

0-25 LBS

25-50 LBS

50 + LBS

Exp. Date: ____/____/____	Signature X
VI ____/MC ____	
CVS (3 digit code on back) ____ [now required]	