

Kelpie Festival Indemnity Form 2010



This form must be completed & signed before competing in any Festival event.

Name: _____

Address: _____

Phone: () _____

Dog name(s): _____

Event/s: _____

I declare my dog/dogs have been immunized against parvo virus, distemper and infectious hepatitis at least 14 days prior to and within 12 months of the date of the competition/s. I understand that my dog/dogs and I have entered the competition/s at our own risk and the conveners and/or their representatives accept no responsibility for any risk or injury, however caused.

Signed: _____

Date: ____/____/____