



Paws in the Park Registration Form



Saturday, September 7th at Jackson Park (W204N16901 Jackson Drive, Jackson, WI 53037)
9:00am Registration - Walk begins at 10:00am

Name _____

Corporate Team Name (if applicable) _____

Address _____ City/State _____

Zip _____ Phone _____ Email _____

Registration Type	Registration Fee Includes	Pre-Registration Fee*	Day of Registration Fee
Student (12 years and under must be accompanied by a paid adult.)	*One t-shirt and walker goodie bag	\$15	\$20
Individual	One t-shirt and walker goodie bag	\$25	\$30
Family Up to four	Four t-shirts and walker goodie bags	\$50	\$60
Additional Family Members (over 4)	Each additional Walker will receive one t-shirt	\$10	\$15
Corporate Team (up to 5)	Up to five t-shirts and walker goodie bags	\$75	\$90
Additional Team Members (over 5)	One t-shirt and walker goodie bag	\$10	\$15

*Pre-registration price is used if postmarked or dropped off at WCHS by August 31st

REGISTRATION FEES

- Student (12 years and under – must be accompanied by a paid parent)
- Individual
- Family (Family of four) – Number of Family Members up to Four _____
- Number of Additional Family Members _____
- Corporate Team (Covers five corporate team members) _____
- Number of Additional Team Members _____
- I cannot participate but enclosed is my donation for \$ _____

Total Amount: \$ _____ Total Walkers: _____

PREFERRED T-SHIRT SIZES (one t-shirt per registered walker)

_____ Youth Small _____ Youth Medium _____ Youth Large _____ Adult Small
 _____ Adult Medium _____ Adult Large _____ Adult X Large _____ Adult XX Large

BANDANA CHOICES:

My pet(s) is/are alumni from WCHS. Please list their name(s): _____

My pet(s) isn't/aren't from WCHS, but we would love a bandana. Number of pets walking: _____

RAISING PLEDGE MONEY - PLEDGE PRIZES

- ☆ 1st Place in Adult Pledges \$200 Visa Gift Card
- ☆ 2nd Place in Adult Pledges \$100 Visa Gift Card
- ☆ Prizes too, for 3rd, 4th and 5th place!

**1st & 2nd Place Adults must raise a minimum of \$400.*

PAYMENT

Enclosed is my payment (Please make check payable to WCHS)

Charge my payment to my: MasterCard Visa Discover

Credit Card # _____ Exp. Date _____ Security Code (on back of card) _____

Name on Card _____ Signature _____

WAIVER

I hereby signify that The Washington County Humane Society, the Village of Jackson, and all other organizations and persons connected with this event are not to be held responsible for any injuries which I, my family, or my pet(s) may suffer while taking part in this event or as a result hereof. I hereby waive any claim for damages to my person, my family, my pet(s) or property. I hereby declare that my pet(s), my family and myself are physically able to participate in the Paws in the Park 2019.

Participant's Signature (or parent/guardian if under 18) _____

Date _____

Please mail or hand deliver to:

The Washington County Humane Society

3650 State Road 60

Slinger, WI 53086



wchspets.org
262-677-4388