TOP DOG ENTRY FORM ACCIDENT WAIVER & RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING IN THIS ACTIVITY OR EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in the activity or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event. I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity or event in which I may participate, and that it will govern my actions and responsibilities at said activity or event. I agree to cooperate with hosting club officials/judge if an incident occurs so a report may be completed and submitted to the ADBA for further investigation.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my dog(s), my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property injury/damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS:

The American Dog Breeders Association Inc.; Sponsoring ADBA Club (as named above) and/or their directors, officers, employees, volunteers, representatives, and agents, the activity or event holders, activity or event sponsors, activity or event volunteers;

(B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

I acknowledge that the above entities listed above, and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific event or activity on behalf of the sanctioning, sponsoring and/or hosting identity.

I acknowledge that this activity or event may involve a test of a dog's and/or person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, judges, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to participants but are also present for volunteers. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event.

I understand that at this event or related activities I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I AM 18 YEARS OLD AND HAVE READ THIS DOCUMENT IN ITS ENTIRETY. I FULLY UNDERSTAND ITS CONTENT AND AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Print Name				
Sign Here		Date		
Address				
City		State	Zip	
The undersigned parent acting in such capacity, event, and has agreed in accident waiver and relefurther agrees to save a above from all liability, lo	and natural ghas consentendividually and ease of liability nd hold harmloss, cost, clair any defect in	guardian does hereby ed to his/her child or wa nd on behalf of the child y set forth above. The less and indemnify ea m, or damage whatsoo or lack of such capaci	represent that he/she is, in fact, rard's participation in the activity or ld or ward, to the terms of the undersigned parent or guardian ach and all of the parties referred to ever which may be imposed upon ity to so act and release said rdian.	
Participant's Name			Age	
Parent or Guardian Nam	ne (print)			
Parent/Guardian signatu	ıre		Date	
Address				
City		State	Zip	
Print Dog's Registered N	Name:			
Print ADBA/LPP Reg. N	umber:			
Date of Birth:				
Check Box(es): Top Dog Sanctioned Event – (All 3 events) \$25/dog/entry				
□ Fric	day	☐ Saturday	☐ Sunday	
For Club Use Only				
Dogs Weight:	Dogs Weight: Height: Verified by judge:			
Club Represent	Club Representative Initials: Total amount paid \$			