

Lucas Park

Dog Park Registration Application

Date of Application: _____ Tag # _____

Application Requirements

Rabies vaccination certificate _____

Name/number of VET _____

Name of owner: _____ Name of Dog _____

Address _____ Breed(s) _____

City _____ State _____ Sex _____ Age _____

Zip Code _____ Color(s) _____

Phone : _____

Dog License Number _____

Please complete a separate application for each dog

Assumption of Risk and Release of Liability: Acceptance of the terms and conditions of this release and adherence to Lucas Park Dog Park Rules are conditions of the dog park registration tag approval, retention and renewal. Dog park Registration and admittance may be revoked for non-compliance.