

Westport Bark/Westport Plaza Liability Waiver Event Date: Saturday, August 31 Location: Westport Plaza

Purpose: This form releases Westport Plaza from any liability in the event of an incident involving an attendee and a dog brought by a rescue group.

Liability Waiver Agreement

Rescue Group Name:_____

Individual Name:_____

Phone Number:_____

Email Address:_____

Address:_____

City, State, ZIP Code:_____

In consideration of being allowed to participate in the Westport Bark event at Westport Plaza, the undersigned acknowledges and agrees to the following:

1. Assumption of Risk: The undersigned recognizes and understands that participation in the event involves inherent risks, including but not limited to interactions between attendees and dogs, which may result in injuries, accidents, or incidents. The undersigned voluntarily assumes all risks associated with participation in this event.

2. Waiver and Release: The undersigned hereby waives, releases, and forever discharges Westport Plaza, its owners, employees, agents, and volunteers from any and all claims, demands, actions, causes of action, or liabilities of any kind arising out of or in connection with participation in the event, including but not limited to personal injury, property damage, or death.

3. Indemnification: The undersigned agrees to indemnify and hold harmless Westport Plaza, its owners,

employees, agents, and volunteers from any and all claims, demands, actions, causes of action, or liabilities of any kind arising out of or related to the rescue group's participation in the event, including but not limited to any incidents involving attendees and dogs brought by the rescue group.

4. Compliance with Rules: The undersigned agrees to comply with all event rules and regulations as well as any instructions provided by event staff. The undersigned acknowledges that failure to comply may result in removal from the event without refund.

5. Medical Treatment: In the event of an injury or medical emergency, the undersigned authorizes event staff to seek and obtain appropriate medical treatment on behalf of any individual associated with the rescue group. The undersigned assumes full responsibility for any medical expenses incurred as a result of such treatment.

6. Photographic Release: The undersigned grants Westport Plaza permission to use photographs, videos, or other recordings of the rescue group and its dogs for promotional purposes without compensation.

By signing below, the undersigned acknowledges that they have read and understood this waiver and release of liability, and voluntarily agree to its terms.

Signature:	
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Name (Printed):_____

Date:

Title/Position:_____

Please ensure that the representatives of the rescue groups read the waiver thoroughly and sign it before participating in the event. You may want to consult with a legal professional to ensure the waiver complies with local laws and adequately protects your interests.

