2025 Louisville Dog Run Association Membership Application

REQUIREMENTS:

- 1. This application completely filled out. 2. A copy of each dog's up-to-date vaccinations for Rabies attached to the application.
- **3.** KENTUCKY STATE LAW REQUIRES ALL DOGS TO BE LICENSED. **4.** Read all rules of the dog park, and sign statement (below) of terms and conditions of membership. **You must fill out completely. Please print legibly.**

Bring your completed application, with attached copies of vaccination records and license certificate to a participating Feeders Supply store, pay your membership fee, and receive your electronic key fob (includes1 per family), which opens the dog park gates, and official dog park permit tag(s), which must be displayed on the dog(s) at all times or the dog is not to enter the park.

Feeders Supply sells the permits as a community service and 100% of the fees are sent to the Louisville Dog Run Association.

PLEASE PRINT LEGIBLY

				PLEASE PRINT	LEGIBLY.				
IAME(S) O	F OWNERS:								
ADDRESS:						CITY:			
TATE:	ZIP:	PHONE: (required)			EMAIL: (required)				
ou may us	se all of the park	s, but must desig	gnate one as you	ur home park,	which you plan	to visit the	e most often. CHECk	ONLY ONE.	
IOME PAR	K: Barkla	ands at Floyds Fo	ork,Cha	ampions,	Cochran Hil	l,	Cooper Chapel,		
E.C.	. Cauley (Oldhar	n County),	Old Louisvill	e, Saw	yer,Ve	ttiner,	Waverly		
/ere you a	member last ye	ear?No,	Yes	(If so, whi	ch park?)				
	N/	AME	В	REED	WEIGHT	AGE	RABIES TAG	# COST	
Dog 1:								\$45.00	
								_	
Dog 2:								\$35.00	
Dog 3:								\$25.00	
Dog 4:								\$20.00	
					1 /11 11 4		nousehold.)		
operated be dog park in aggressive in employee responsible or injury of the dog part in employee in em	hereby acknowled by the Louisville I necessarily involved or dangerous do expressly assum- of the State, Medie to supervise the fany kind sustainance, as well as any By signing this relation of the Oldham County I tims, demands, danted, resulting from the control of the county I interestand, and against the county I the county I is the county I is	Dog Run Association es risks of injury to logs, unpredictable these risks and retro Louisville, Oldling dog park at any med by any human of fixture or equipmease of liability and Fiscal Court, 21st commandes, or causes of mor arising out counted and understand the counter of	arily have applie on. I understand to me, other peo e behavior, lack or responsibility for ham County Fiscitime. I further the or dog while usment located the nd using the dog Century Parks, as of action present of my intended und this release all of the Dog Parks all of the Dog Parks and of the Dog Parks all of the Dog Parks and of the Dog Parks and this release all of the Dog Parks and	d to participated that the acts of ple, my dog(s), of training, and or the action(s) of al Court, 21st Counderstand and sing the dog parerein. park, I hereby find the Louisvill or future, whise of the dog part or future, whise of the dog part of liability and the Louisvill of	and use, with not unleashing my and other dogs, lack of vaccinating from dog(s) and entury Parks, or agree that none k. I therefore except and forever the Dog Run Association the same ark premises, far accept its tern derstand that a	ny dog(s), or a dog(s) or a dog(s) or a lincluding bon. myself. I use the Louisvice of these expressly association, their be known occilities, or expressed and contadherence	ne or more of the do being physically pres- but not limited to, ris- inderstand that no ag- ille Dog Run Associat entities is liable for an sume all risks associal discharge the State for employees and age- for unknown, anticipal equipment. ditions. I have also- to these rules is a de-	ent inside the ks resulting from the ks resu	
of membe	ership and use o	f the dog parks a	and that violati	on of any of th	ese rules will r	esult in tei	rmination of memb	ership.	
Signature							Date		
FEEDERS S	SUPPLY, PLEASE	FNTFR THE FOLL	IOWING: FX	TD 4 VEV EAD /					
KEA EUB c	FRIAI#	/1	Includes only 1	ner household	optional) SERIA	.L # t	(Dog # 1	 \DERMIT TA	

Donation

by check or money order to P.O. Box 221611 Louisville, Kentucky 40252