



**Bennett Cert Dog Park**  
**2020 Membership Form and Release of Liability**



- Membership year begins each year on the first day of January
- Lock codes will be changed annually and as needed
- Membership Fee - \$30.00 per household for first 2 dogs, \$5 for each additional dog (same household)
- Pay online at <https://rpguide.carrollcountymd.gov/default.aspx?staff=Y>
- We accept checks by mail or cash, check, Visa, MasterCard, and Discover in person at our main office (300 South Center Street Westminster, MD 21157 open M-F 8am-5pm)
- A **copy of a County Dog License AND a copy of rabies certificate** is required for each dog  
*Half Price (Sept 2020– Dec 2020) \$15.00 and \$5 for each additional*

**Reminder –handler is limited to 2 dogs per visit**

**Please Print Clearly**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

Please email me for volunteer opportunities and clean-up days

Emergency Contact & Phone \_\_\_\_\_

Additional household members permitted to use access tag (must be over 18 years of age and Initial below and reside in the same home)

1. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

**Dog #1**

Breed \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Weight (lbs.) \_\_\_\_\_

Name of Dog \_\_\_\_\_  Male  Female Spayed/Neutered  Yes  No

Color(s) \_\_\_\_\_ County Licensed \_\_\_\_\_

License # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (attach copy) Rabies Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Has this dog ever displayed any aggressive behavior toward another dog(s) or Person  Yes  No

**Dog #2**

Breed \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Weight (lbs.) \_\_\_\_\_

Name of Dog \_\_\_\_\_  Male  Female Spayed/Neutered  Yes  No

Color(s) \_\_\_\_\_ County Licensed \_\_\_\_\_

License # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (attach copy) Rabies Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Has this dog ever displayed any aggressive behavior toward another dog(s) or Person  Yes  No

Additional dogs (over two) \_\_\_\_\_ @ \$5.00 each (Use additional sheet/must be in same household)

I have read and understand the Bennett Cerf Dog Park Rules - (initial) \_\_\_\_/\_\_\_\_  
<https://www.carrollcountymd.gov/media/1263/rules.pdf>

**Hold Harmless (please initial below)**

\_\_\_\_/\_\_\_\_ I understand that Carroll County Recreation and Parks (CCRP) is entitled at their discretion to revoke membership if I do not comply with all rules and regulations for Bennett Cerf Dog Park (BCDP).

\_\_\_\_/\_\_\_\_ I understand that my dog must have his/her dog park tag as well as current rabies and county license tags on his/her collar at all times during use of BCDP.

\_\_\_\_/\_\_\_\_ The dog park membership is good for one year beginning January 1st and ending December 31st. I understand I must renew my membership yearly to continue using the BCDP.

\_\_\_\_/\_\_\_\_ I understand that I cannot give the gate code to any person and in doing so will revoke my membership with no refund.

\_\_\_\_/\_\_\_\_ By signing this release of liability and using the BCDP I hereby fully and forever release and discharge Carroll County Commissioners, its employees and volunteers from any and all claims, demands, damages, or causes of action present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of my use of the BCDP. I have carefully read the release of liability and understand, agree with and accept its terms and conditions.

**Owner signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Payment Options:**

- By Mail: Send completed form, required documents and Payment by check to:

**Bennett Cerf Dog Park  
Carroll County Recreation and Parks  
300 South Center St Westminster, MD 21157**

Checks should be made payable to Carroll County Commissioners

- Pay online: <https://rpguide.carrollcountymd.gov/default.aspx?staff=Y>  
Fax required form and documents to 410-876-8284 or email to [ccrec@carrollcountymd.gov](mailto:ccrec@carrollcountymd.gov)
- In person: cash, check, Visa, MasterCard, and Discover  
300 South Center Street, Westminster, MD 21157 open M-F 8am-5pm

**Half Price (Sept 2020 – Dec 2020) \$15 and \$5.00 each additional**

**Office Use Only**

ID Tag Pet #1 \_\_\_\_\_ ID Tag Pet #2 \_\_\_\_\_ Cost: \$30.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

ID Tag Pet #3 \_\_\_\_\_ ID Tag Pet #4 \_\_\_\_\_ add'l dog(s) \$ 5 X \_\_\_\_\_ = \$ \_\_\_\_\_

Copy of County License and Rabies attached for each dog **Total = \$ \_\_\_\_\_**

Payment Date: \_\_\_\_\_ RP # \_\_\_\_\_ Tag(s) Issue Date: \_\_\_\_\_