

Please bring completed form to the event, or mail completed form, including payment to Lee County Library System Attn: PugFest
2345 Union Street | Fort Myers, FL 33901. For more information, contact Margie Byers at 239-533-4826 or mbyers@leegov.com.



Synchronized Squat Contest Registration Form

A \$5 donation is requested for each dog entered in the competition.

Entrants must be leashed and licensed.

Entrants must be present at PugFest VII on Sunday, January 29, 2012, at the Bell Tower Shops.

Entries must be submitted no later than 2:00 p.m. January 29, 2012.

This contest begins promptly at 2:30 p.m.

Participant's number must be pinned to the owner and visible to the judges.

Winners will be announced as soon as contest is complete.

Winners' name and photo will be included in our post event press releases and on our website.

Elimination Contest: When the music stops the last dog to sit will be eliminated. The last dog remaining in the contest is the winner. There may be several rounds with a final championship round.

Judging Criteria: Entrants will be judged on speed of dogs to sit down. The judges' decisions will be final.



In-home obedience training through positive reinforcement.

Contestant Registration Form ~ PLEASE PRINT OR TYPE

A \$5 donation is requested. Advance registrations have the option to pay by credit card.

MY CHECK PAYABLE TO LCLS-READING FESTIVAL IS ENCLOSED

PLEASE CHARGE MY CREDIT CARD VISA MASTERCARD AMERICAN EXPRESS

OWNER'S NAME _____ PHONE _____

ADDRESS _____

CITY, STATE, ZIP _____ EMAIL _____

PUG'S NAME _____ MALE _____ FEMALE _____ AGE _____

CARD NUMBER _____ EXPIRATION DATE _____

NAME AS IT APPEARS ON CARD _____

MINOR AND ADULT PHOTOGRAPH AND PUBLICATION RELEASE FORM

I, _____ **MODEL, OR PARENT/GUARDIAN OF MODEL**, agree to allow myself or my minor child/children to participate in and to be photographed for publication purposes involving the Lee County Library System.

I give the Lee County Library System the absolute right to use, re-use and publish without restriction photographic pictures of myself and/or my minor child for art, advertising, trade or other purpose.

I also consent to the use of any printed matter in conjunction therewith.

I indemnify and hold harmless Lee County and any employee of Lee County against any and all claims arising from the use of my photograph or my child's photograph, and will further indemnify and "hold harmless" the County, its employees or agents against our participation in the event, from and against all costs, expenses and liabilities resulting from any claim brought thereon to the extent of the County's liability under general law.

By signing this form, I am representing that I am possessed with the lawful authority to sign this waiver for the child to participate in and to be photographed during a Lee County Library System program, and that I hereby bind all parents and guardians of the child to the terms of this Release.

DATE _____

Minor(s) Name(s) (List Each Child)

Signature of Model, or Parent/Guardian of Model

Signature of Witness

Printed Name of Model, or Parent/Guardian of Model