



TOWN OF CARMEL RECREATION & PARKS DEPARTMENT
 SYCAMORE PARK, 790 LONG POND ROAD
 MAHOPAC, NEW YORK 10541

JAMES R. GILCHRIST, CPRP, DIRECTOR

TELEPHONE: (845) 628-7888 FAX: (845) 628-2820

EMAIL: carmelrecreation@ci.carmel.ny.us

WEB: <http://www.carmelny.org>

**SYCAMORE BARK PARK
 WAIVER & HOLD HARMLESS AGREEMENT**

In consideration of the Town of Carmel (the "Town") granting permission to the undersigned to bring my dog(s) to the Bark Park of the Town, the undersigned hereby agrees to assume all liability and all risk of loss and shall be responsible for the supervision and welfare of all persons and/or dogs arriving on and/or using Town property and/or facilities in connection with permit issued. The undersigned hereby acknowledges that I have voluntarily applied to participate and use the Town of Carmel Bark Park and understand that the acts of unleashing my dog(s) or being physically present inside the Town of Carmel Bark Park necessarily involves risks of injury to me, other people, my dog(s) and other dogs, including but not limited to, risks resulting from aggressive or dangerous dogs, unpredictable behavior, lack of training, and lack of vaccination.

The undersigned further hereby releases the Town of Carmel, its officers, employees, servants, agents and enumerated volunteers from any liability for any injuries sustained, or damages incurred and to reimburse the Town for any damages either arising out of or directly or indirectly in connection with the undersigned's use of the Town property and/or facilities. The undersigned hereby further agrees that I will indemnify and hold harmless the Town of Carmel, its officers, employees, servants, agents and enumerated volunteers harmless from any liability or claims that may result from any use by me and/or my dog(s) of the Town property and/or facilities arising out of this permit.

The undersigned represents that any dog listed on the application is at least four (4) months old and has been licensed, de-wormed, vaccinated as required. The undersigned also represents that no dog listed on the application has exhibited aggressive or dangerous behavior and the undersigned has no personal knowledge that said dog(s) has ever bitten another person or dog.

Owner's Name: (Please print clearly) _____

Date: _____

Owner's Signature: _____

Town Employee Signature: _____

Received Town of Carmel Dog License: _____ **ID TAG#:** _____

Res. Initial _____

Resident Received Lock Combination & Rules: _____