



# Clinton Township Recreation Dog Park Pass Application

Office use only	
Key #	_____
Initials	_____
Fob	_____
RecPro	_____

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

<b>Household Dog Names:</b>	<b>Birthdate</b>	<b>Household Dog Names:</b>	<b>Birthdate</b>
Dog #1 _____	_____	Dog #3 _____	_____
Dog #2 _____	_____	Dog #4 _____	_____

**KEY FOB FEE:** I would like to purchase \_\_\_\_\_ key fob(s) @ \$10.00 each = \$ \_\_\_\_\_  
**Please mail my key fob – Postage \$3.66** = \$ \_\_\_\_\_  
 I already own key fob(s) and do not need to purchase any this year = \$ 0.00

**MUST OWN A KEY FOB TO ENTER PARK**

**MEMBERSHIP FEES:** Please check the membership fee that applies to you

_____ Resident	\$20.00	_____ Non-Resident	\$40.00
_____ Resident Senior <i>(Age 55 and older)</i>	\$18.00	_____ Non-Resident Senior <i>(Age 55 and older)</i>	\$36.00

Dog Park Access Expires - 1 year from date of purchase or renewal **TOTAL FEES DUE: \$** \_\_\_\_\_

To register by mail or fax, you must send a copy of valid shot records for Rabies, DHPP, & Bordetella, a copy of the paper dog license and a copy of the front and back of the dog owners' driver's license.

Initial here that you have read and understood the code of conduct

**WAIVER OF LIABILITY, WARRANTY OF PHYSICAL HEALTH**

We, being the parents for the individuals whose names are set forth on the registration form, represent and warrant that the participant is physically healthy and able to participate in the activities for which the participant is registered, acknowledging the full understanding of such activities and an opportunity to review with the Department any and all questions regarding such activities. We further represent that we have full authority on behalf of such participant or participants to consent to the participant's participation and do consent to such participation. We acknowledge that participation in recreational activities carries the risk of serious injury or death from occurrences during activities, including, but not limited to: being struck by objects, slip, trip or fall, being injured by other participants, and other health hazards. We fully release and absolve from liability the Charter Township of Clinton, its employees, agents contractors and those in concert and participation with it from any and all liability, injury or damages on behalf of our participant, and individually on behalf of ourselves. This release extends to personal and bodily injury, as well as property damage. The above includes a waiver of liability and should be read carefully and fully before signing. I the undersigner, hereby agree to allow the individual(s) named hereon to participate in the Charter Township of Clinton Parks and Recreation activities. I certify that, to the best of my knowledge, the participant(s) named hereon is/are physically fit and able to engage in Parks and Recreation activities. In case of emergency, I give my permission for emergency medical treatment. This form shall be considered valid until canceled or changed in writing by the undersigned parent/guardian/participant. I hereby authorize the Charter Township of Clinton Parks & Recreation Department to use all photos, both video and audio portion of video tapes on which I or my dependent appears. I understand that portions of these tapes may be used in other programs, training aids, and production at the discretion of the Township of Clinton Parks and Recreation.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**For additional information and assistance, please contact us at: Clinton Township Recreation**  
40700 Romeo Plank Road, Clinton Township, MI 48038 Phone: 586-286-9336 Fax: 586-723-8282  
E-mail: recreation@clintontownship.com Website: [www.clintontownship.com/recreation](http://www.clintontownship.com/recreation)



<b>Credit Card Payment</b> MC _____ VISA _____	<b>Signature</b> X _____
<b>Exp. Date:</b> ____ / ____	<b>Amount Approved \$</b>
<b>CVS (3 digit security code)</b> _ _ _	_____

## CODE OF CONDUCT & INFORMATION



A pass may be revoked or suspended for any Code of Conduct violations. Course of action may include but are not limited to: restricted use of park, temporary or permanent bans on using park or professional dog training/evaluation at owner's expense.

1. **In compliance with the Macomb County Animal Control, an incident/bite report will be filed immediately for any incident involving bodily injury (broken skin) to persons or dogs and both parties involved will have passes suspended. You may also want to create a police report by calling the Clinton Township Police Dept. at 586-493-7800 after a bite or any other activity deemed threatening or inappropriate.**
2. **Use of the dog park shall be at the owners own risk. Clinton Township Recreation is not responsible for any injury or damage caused by any dog in the park.**
3. **All owners should conduct themselves in an appropriate manner and be respectful to others while using the dog park.**
4. Any dog showing aggression or rough play toward people and/or other dogs must be immediately leashed and removed from the dog park by its owner/handler.
5. Owners are responsible for their dogs at all times. Dogs cannot be out of control, out of your sight, or damaging the park in any way. Your dog must be non-aggressive and under voice command.
6. All dogs must be on leash until inside the dog park common area. Please keep your leash with you at all times.
7. For the safety of all registered dogs, please do not allow anyone **without a valid** key fob pass, into the dog park. A key fob may be turned off for a variety of reasons and each party entering the park should do so by scanning their own key fob. Please do not enter and exit as a group.
8. Your key fob is a purchase – not a deposit. If you wish to transfer it to another owner, please let the office know immediately.
9. The dog park is open from dawn to dusk or 9:00pm, whichever is earlier.
10. Dogs must have current license and immunization records on file with the Recreation office to visit the dog park. A current copy of the owner's driver's license must be on file.
11. Once immunizations have expired, you have one week to update vaccinations and provide paperwork to the office. Otherwise, your key fob will be suspended until proof of updated vaccinations has been submitted to the Recreation office.
12. Owners must clean up pet waste, inside and outside of the dog park. Bags are provided inside the park. Please do not take extra bags for personal use.
13. Not permitted into the park: children under 5 years of age, dogs in heat, and puppies under 4 months old.
14. Limit 2 dogs per adult when visiting the park. Up to 4 dogs in a household can be registered on the same key fob pass.
15. Dogs must be accompanied by an adult (18 years or older) at all times within the enclosure.
16. Children ages 5 - 17 may only visit the dog park with an adult (18 years or older).
17. Dogs weighing 25 lbs. or less are permitted inside the small dog area as well as, the large dog area (at owner's discretion). Large dogs are not allowed to use the small dog area.
18. Please place trash and cigarette butts in the proper receptacles.
19. Water fountain is on during the warmer seasons.

### Additional Information

Incidents must be reported by phone, email or in person within two business days. Forms are available on our website or in the office.

**For maintenance issues regarding the park, please call the Dept. of Public Services at 586-286-9300**

Memberships are active for 1 year from date of purchase or renewal.

Clinton Township Recreation 40700 Romeo Plank Rd. Clinton Twp, MI 48038 Phone: 586-286-9336

Fax: 586-723-8282 [recreation@clintontownship.com](mailto:recreation@clintontownship.com) [www.myctpr.com](http://www.myctpr.com)

[Facebook.com/ctprdogpark](https://www.facebook.com/ctprdogpark)

rev 1.23