



Saving Chance Pup Party at Ocean Breeze Waterpark

ATTENDEE WAIVER



1. I acknowledge that I voluntarily agree to participate in the Pup Party event held at Ocean Breeze Waterpark benefiting Saving Chance.
2. I grant Ocean Breeze Waterpark the right to film/videotape/photograph myself and dependents while on park property for any purpose without payment or consideration thereof.
3. By participating in the Saving Chance Pup Party at Ocean Breeze Waterpark, I recognize and acknowledge that injury, illness, or damage could occur to my person, children or property caused by any of the participating dogs, participants, premises or property defects, or other causes. Nonetheless, in consideration of the acceptance of this entry and the allowance of myself and/or my children's participation in the Saving Chance Pup Party at Ocean Breeze Waterpark, I, for myself and my children, and all others who might otherwise make claim on behalf of me or my children, do hereby voluntarily assume full and sole responsibility for any injury, illness, or damage, accidental or intentional, which may occur to myself, my children or property directly or indirectly as a result of or during my or my children's participation in the Saving Chance Pup Party at Ocean Breeze Waterpark.
4. I agree to indemnify, hold harmless and defend Saving Chance and Ocean Breeze Waterpark and its partners, officers, directors, agents, employees, affiliates and parent companies, from all claims, liabilities, damages or costs (reasonable attorneys' fees), suffered or incurred by Ocean Breeze Waterpark, Ocean Breeze Waterpark employees, Ocean Breeze Waterpark facility or any third parties, conjunction with the Saving Chance Pup Party event, which results from or are caused (directly or indirectly) by the negligence of other participants, myself or my children.
5. I agree that all ticket and rental sales are final, and no refunds or cancellations will be given.
6. Only one dog per owner age 18 & up. Owner must maintain control of their dog at all times.
7. Swimming in designated dog swim areas is for dogs only. Humans are not permitted in dog swim areas.
8. All guests bringing a dog must sign the Assumption of Risk agreement prior to entering the park. All guests, no matter if they are bringing a dog or not, must sign the Attendee Waiver prior to entering the park.
9. All dogs must have dated proof of current vaccinations and rabies vaccination.
10. Be courteous to other guests and other dogs. All dog owners must clean up after their dog and should bring sanitary bags with them.
11. Dogs may be released from their leash only upon entering the designated swim areas. Dogs must remain on a non-retractable, 6 feet or shorter, leash in all other areas of the park.
12. Dogs will be assigned a designated swim area depending on the weight of the dog. Dogs less than 30 pounds will be allowed in Hook's Lagoon Water Playground. Dogs 30 pounds or more will be allowed in Runaway Bay Wave Pool and the entry pool of the Adventure River.
13. No children under the age of 16 are allowed without adult supervision.
14. Only non-aggressive, social dogs permitted. If a dog exhibits aggressive behavior towards another dog or human as determined by Saving Chance or Ocean Breeze Waterpark, the dog and the dog owner may be escorted from the event.
15. Dogs should be exposed to swimming and have no health conditions that may endanger themselves or others.
16. No outside food or beverage (dog or human) is allowed inside the waterpark.
17. Personal dog toys are not permitted inside the park. Dog toys will be provided and can only be used in the designated swim areas.

I fully understand and agree that failure to fully comply with any and all obligations outlined in the Saving Chance Pup Party Attendee Waiver and Terms & Conditions will result in my removal from the park and forfeiture of my entrance fee.

Printed Name: _____

Address, City, State, Zip: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Participants under the age of 16 in my direct care:

Participant #1: _____ Age: _____

Participant #2: _____ Age: _____

Participant #3: _____ Age: _____

Participant #4: _____ Age: _____



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ASSUMPTION OF RISK WAIVER



(For Dog Owners Only)

I acknowledge that I voluntarily have applied to participate and use, with my dog, Ocean Breeze Waterpark for the Saving Chance Pup Party at Ocean Breeze Waterpark.

I understand that the act of unleashing my dog and being physically present inside the waterpark area necessarily involves risks of injury to me, to other people, to my dog, and to other dogs. I understand these risks are entirely my responsibility. I expressly assume these risks. I am aware of the risks and hazards inherent upon entering the waterpark area and I choose to voluntarily enter the premises, knowing the conditions might become more hazardous and/or dangerous for me and/or my dog and I voluntarily assume all such risks, loss, damages, or injury that may be sustained by entering the waterpark and dog swim areas.

By signing this Assumption of Risk and using the waterpark, I hereby fully and forever release and discharge Ocean Breeze Waterpark and its partners, officers, directors, agents, employees, affiliates and parent company and Saving Chance from any and all negligent acts and omissions in the same. I also agree to indemnify Ocean Breeze Waterpark and its partners, officers, directors, agents, employees, affiliates and parent company and Saving Chance from all claims, liabilities, demands, damages, costs, rights of action 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 or intended use of the waterpark.

If you have questions or concerns prior to participating in the Saving Chance Pup Party at Ocean Breeze Waterpark event, contact the Ocean Breeze Waterpark Group Sales Department by emailing groupsales@oceanbreezewaterpark.com or by calling (757) 422-4444 ext. 229.

I have carefully read this Assumption of Risk Waiver and understand and fully agree with its contents.

Owner's/Handler's Name: _____ **Dog's Name:** _____ **Weight:** _____

Address, City, State, Zip: _____

Phone: () _____ **Email:** _____

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY									
Proof of Current Rabies Vaccination:		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Type of Proof:			
Proof Verified By:						Date:			