

2st Annual Wurst Dog Derby Registration Form

A Kasson Chamber of Commerce Oktoberfest Event

Who can race?

If your dog is a dachshund, or most likely a dachshund, they are eligible. Height restriction applies! Dogs cannot be aggressive to dogs or people, and must be on leash, except when they are racing in the confined area. PLEASE NOTE: You are responsible for cleaning up after your pets before leaving.

Vaccinations

Dogs MUST be current on all vaccinations – including Bordetella - and weigh under 20lbs, or they will NOT be allowed to participate. You must send current vaccination proof via email to info@carriagehousevets.com with subject line referencing “Wiener Dog Races” or bring proof to the event. Staff and volunteers have the right to refuse any dog for event safety with or without cause.

Registration Information

Prizes will be awarded for 1st, 2nd, 3rd place, and best dressed dog (participation in best dressed is optional), along with gifts for all participating dogs. The 1st Annual Wurst Dog Derby is free. Please consider donating to the Small Dog Rescue of Minnesota in lieu of a registration fee. If you are entering more than one dog, you must fill out a form for each dog.

How to Register

To register, you must complete and return this form via email to jgalloway@kmtel.com, drop off a completed form at KMTelcom at 18 2nd Ave NW, Kasson, MN 55944 addressed to Jennifer Galloway, or mail a printed copy to:

Kasson Chamber of Commerce
Attn: Wurst Dog Derby
PO Box 326
Kasson, MN 55944

There are a total of 25 race spots. Once 25 dogs have been registered on a first-come first-serve basis, registration will close. Registration closure will be updated on Facebook event. Please arrive between 12:15 to 12:45 PM if you did not pre-register. If you did pre-register, please arrive no later than 12:45. To be considered registered, this form including the liability waiver must be completed, signed, and dated. If you do not register by this time, you will not be able to participate in the race. You will be welcome to attend and watch.

Owner Information:

Name (please print): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Dog Information:

Name: _____ Age: _____

Liability Waiver

We reserve the right to remove any dogs that we feel pose a safety issue.

I recognize the risks involved in the Wurst Dog Derby and hereby waive, release and hold harmless all sponsors, contributors, supporters, volunteers, property owners, and officials associated with the event, from all liability, claims and rights for damages from injuries growing out of, related to, or arising from participating in the Kasson Chamber of Commerce Oktoberfest event activities, including but not limited to the related Wurst Dog Derby. In addition, I specifically hold harmless the Kasson Chamber of Commerce, Zumbro Valley Recreation Club, Zumbro Valley Golf Course, Home Improvement Professionals Inc., Small Dog Rescue of Minnesota, Kasson Hardware Hank, Hidden Pines Restaurant, Carriage House Animal Hospital, KMTelecom, Czaplewski Funeral Home, and each listed groups agents, staff, and volunteers. I further certify that I have full knowledge of the risks involved in this event. If I do require medical attention as a result of my participation in the abovementioned activities, I authorize medical personnel associated with said events or any other such emergency services called to the scene to provide such medical care as is deemed appropriate by such medical personnel. Should any part of this liability waiver be deemed unenforceable in a court of law, I agree this waiver shall be severable and the unenforceable language will be struck and all other components shall remain intact. I further certify that this waiver is presented in its entirety on this form and no other written or oral sections exist or shall be considered replaced by this signed waiver.

I hereby certify by signing with my own hand that I have read and understood the above waiver and agree to its terms.

Name (Please Print): _____

Signature: _____

Date: _____

Phone Number: _____