

Woofstock - Fund Raising Form

Individual/Team Challenge

Name/Team Captain: _____ Our fund raising goal is \$ _____

Address: _____

Email: _____ Phone: _____

If team, team name: _____

I hereby waive and release any and all claims for myself and my staff against Wanderers' Rest Humane Association, all sponsors, organizational partners, volunteers, and staff for any injury or illness which may directly or indirectly result from my participation in the Canine Classic. I grant full permission for photographs and videotapes of me and my staff to be used for any publicity or promotional purposes by Wanderers' Rest Humane Association.

Signed: _____ Date: _____

Record donations below — Bring this form and all funds raised to the event on August 17, 2019

Name	Address	Phone	Donation Amount
		Total:	