Woofstock - Fund Raising Form
Veterinary Challenge

Name: _____ Our fund raising goal is $ _____

Address: _____

Email: _____ Phone: _____

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 Woofstock. 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: _____

All donations must be turned in by 1:30 P.M. on Saturday August, 17, 2019 to qualify for Veterinary Challenge Award

Name	Address	Phone	Donation Amount
		TOTAL	