

# Forest Park Southeast Dog Park Membership Application

For membership, please submit:

- Completed application
- Check made payable to "FPSE Dog Park"
- Signed Waiver of Liability
- Proof of spaying/neutering
- Current vaccination records for:
  - Rabies, Distemper, Bordetella

Submit the above documents (mail or in-person) to:

Park Central Development Corporation  
ATTN: FPSE Dog Park  
4512 Manchester Ave, Suite 100  
St. Louis, MO 63110

Office Hours:

Monday & Wednesday 7:30 AM - 5:00 PM



## Annual Membership Fees:\*

Please note that member dues commence on June 1 of each year and are pro-rated as indicated below:

FPSE Residents**	1 Dog	2 Dogs	3 Dogs	Non-Residents	1 Dog	2 Dogs	3 Dogs
As of June 1, 2016	\$35	\$60	\$75	As of June 1, 2016	\$50	\$75	\$90
As of January 1, 2017	\$20	\$40	\$50	As of January 1, 2017	\$35	\$50	\$65

\* Ask about our income based discount programs

\*\*Residents must provide proof of address

## Owner #1:

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
EMAIL \_\_\_\_\_ PHONE NUMBER (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

## Owner #2 (if applicable):

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
EMAIL \_\_\_\_\_ PHONE NUMBER (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

## Dog #1:

NAME \_\_\_\_\_  
BREED \_\_\_\_\_  
WEIGHT \_\_\_\_\_ AGE \_\_\_\_\_

## Dog #2:

NAME \_\_\_\_\_  
BREED \_\_\_\_\_  
WEIGHT \_\_\_\_\_ AGE \_\_\_\_\_

## Dog #3:

NAME \_\_\_\_\_  
BREED \_\_\_\_\_  
WEIGHT \_\_\_\_\_ AGE \_\_\_\_\_

## Questions?

Please email: [fpsedogpark@gmail.com](mailto:fpsedogpark@gmail.com)

## SPECIAL THANKS TO OUR SPONSOR

- Check this box to share email address with the Watering Bowl

