



**Lake Valley WDC ~ USCA Fall Trial September 23, 2023**

**Judge: Michael Caputo USCA**

**ENTRY FORM**

- **Titles Offered Please Circle One:** BH-VT IGP 1 IGP 2 IGP 3 FH
- BH-VT \$100.00 IGP1-3 \$125.00 FH \$150.00

Scorebook #: \_\_\_\_\_

Handler USCA Membership #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Is this your first trial/title? [ ] YES [ ] NO *(If yes, you must take the USCA BH Written Exam)*

Owner USCA Membership #: \_\_\_\_\_

Expiration Date : \_\_\_\_\_

Please make a check payable to: Vicki Keller/LVWDC. Mail entries to:

**Vicki Keller, 830 Bluff Drive, Knoxville TN 37919**

**Any questions, please contact Vicki: 865.604.1377 / Vicki.keller@kellergroup.net**

Dog's Registered Name: \_\_\_\_\_

Dog's Call Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Registry: \_\_\_\_\_ Registration #: \_\_\_\_\_

Tattoo/Microchip: \_\_\_\_\_

Previous Titles Earned: \_\_\_\_\_

Handler: \_\_\_\_\_

Phone #: \_\_\_\_\_

Handler Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner(s): \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please read the following statement carefully: It is hereby understood that every dog at this trial will be under the direct care and control of its handler. The undersigned agrees to be fully responsible for any and all actions of their dog, including dogs owned by another but in the care of the undersigned's, and to hold harmless all members, officers and directors of the Lake Valley Working Dog Club, and any property owners associated with this event in case of accident or injury. I hereby assume all responsibilities and liabilities for my dogs and myself and agree to abide by all USA guidelines and rules.

**No refunds on entry fees.**

Signature of Owner/Handler: \_\_\_\_\_ Date: \_\_\_\_\_

