



KAW VALLEY WORKING DOGS

2023 FALL TRIAL

3100 SW 69TH ST, WAKARUSA, KS 66546

SEPTEMBER 23RD, 2023

JUDGE: ROBIN AYLING



TITLE APPLYING FOR _____
 REGISTERED NAME OF DOG: _____ CALL NAME: _____
 REGISTRATION NUMBER: _____ REGISTRATION ORGANIZATION: _____
 BREED: _____ SEX: _____ DOB: _____ CURRENT TITLES: _____
 USCA SCOREBOOK: _____ TATTOO #: _____ MICROCHIP #: _____
 SCOREBOOK IF OTHER THAN USCA _____

HANDLER NAME: _____
 ADDRESS: _____
 PHONE: _____ EMAIL: _____
 MEMBERSHIP# _____ EXP DATE _____ ORGANIZATION: _____
 DATE AND LOCATION OF BH BY HANDLER: _____

PLEASE LET ME KNOW IF YOU ARE A 1ST TIME BH ENTRANT (NOTE: FOR THOSE THAT HAVE NOT TITLED A DOG AND ARE DOING A BH FOR THE FIRST TIME, YOU WILL BE REQUIRED TO TAKE A WRITTEN EXAM ON THE DAY OF THE TRIAL)

IF OWNER IS DIFFERENT FROM HANDLER:
 OWNER NAME: _____
 ADDRESS: _____
 PHONE: _____ EMAIL: _____
 MEMBERSHIP# _____ EXP DATE _____ ORGANIZATION: _____

ENTRY FEES: \$60 – BH, AD, UPr 1-3(OB), FPr 1-3(TR) \$80 – IGP 1-3, GPR 1-3(OB, P), FH 1-2
 NO REFUND ON ENTRY FEES. ALL NON USCA MEMBERS PLEASE ADD \$50 FILING FEE
 EMAIL ENTRY TO: KAWVALLEYWORKINGDOGS@GMAIL.COM

CONTACT ME FOR PAYMENT INFORMATION

MAILING OPTION:
 KAW VALLEY WORKING DOGS
 YELENA SCHEPKIN
 2024 LEARNARD AVE, LAWRENCE KS 66046

I understand that participation in this event is at my own risk. I will not hold Kaw Valley Working Dogs Club, USCA, or any of its members and officers or property owners and any persons related to this event responsible for damages that may occur to my person, my property, or my dog(s). I understand that I am always fully responsible for the actions of myself and my dog(s). I understand that the schedule for the trial can change at any time. I also understand that my trial fees are non-refundable.

SIGNATURE: _____ DATE: _____

