## O.G. BIERSTADT SCHUTZHUND CLUB FALL TRIAL October 21-22, 2017 ENTRY FORM

NAME OF DOG:					
NAME OF HANDLER:					
DRESS:CITY			ST	ZIP	
PHONE:					
NAME AND ADDRESS OF OWNER	(if different from handler)				
SEX: BREED:	TITLE ENTERED FOR:		If BH, is this your first BH?		
PRESENT TITLE:	DATE AWARDED:	s	SCOREBOOK#:		
REGISTRATION#:	DATE OF BIRTH:	TATTOO/MICROCHIP#:			
Event		Event Entered	UScA Member Fee	Non-UScA Member fee	Your Fee
IPO I, IPO II, IPO III, APr 1-3, FH1, FH2			\$65	\$100	
BH, AD			\$55	\$90	
UPr 1-3, FPr 1-3 (each) (formerly		\$50 <b>'OUR TOTAL FEE</b>	\$85		
Entries will be accepted, if space dog will be allowed to compete without YOUR COMPLETED ENTRY FO  • Check for your Total Fees from  • A photocopy of your scorebook  • A photocopy of your USA Memily Please be sure to have your curial Secretary when you check	out a USA scorebook, AWDF-application of the ACCOMPANIE above - MAKE CHECK PAYA front page and page/s confirm bership Card or AWDF-association of the Accordance of the AWDF-association of the AwdF-a	roved scorebo D BY: ABLE TO O.C ing your dog ated Club Me	ok, or WUSV-recogr G. BIERSTADT SC 's titles previously a mbership Card.	nized scorebook.  CHUTZHUND CL  awarded.  EMBERSHIP MUST	. <u>.UB</u> T BE CURRENT
Send Entry form, Check for fees, & required photocopies to Robin Stachula, Trial Secretary 11102 W Edgerton Ave, Hales Corner WI 53130 414-852-7156 rstachula@gmail.com		Entry forms and Event Updates also available on the O.G.Bierstadt Facebook Page and Google+ page.			
I agree to be fully responsible for the Bierstadt Schutzhund Club, its meml caused directly or indirectly by my do liability for such claims. I agree to co	pers and officers, and the Trial Gr og/s, and any loss or injury to my	ounds propert dog/s while or	ry owners harmless for the event grounds.	or any loss or inju I assume all resp	ry allegedly
Signed		Date			