



# BAY AREA SCHUTZHUND CLUB

USCA TRIAL

Judge- Nathaniel Roque

Helper:

January 23th, 24th 2021

Place: 2318 Warm Springs Ct, Fremont CA 94539

## Mail to:

Andrea Margolis

BAY AREA SCHUTZHUND CLUB

1116 Kendal Ct San Jose, CA 95120

## Entry Fees:

USCA member      NON USCA Member(add \$50)

BH VT: \$85      \$135

IGP 1-3: \$100      \$150

GPR 1-3: \$100      \$150

## DOG INFORMATION

Dog's Registered Name:

Call Name:

D.O.B(MM/DD/YYYY):

Sex (circle): MALE OR FEMALE

Scorebook #

Dog breed:

Tattoo or Microchip#:

Dog's current Titles:

Registration Number:(AKC, USA or other)

Entering for which: BH, IGP 1, IGP 2, IGP 3  
GPR 1, GPR 2, GPR 3,

HOT(Handler Owned & Trained): YES or NO (circle )

## HANDLER'S INFORMATION

Handler's Name:

Address:

City

State

Zip

Phone #:

Email:

Handler's USCA membership#:

Expiration Date:

Previous BH Trial by Handler: YES or NO ( if no, be prepared to take the written exam on the day of the trail)  
Date and Club when taken:\_\_\_\_\_

Dog Owner's Name and Address (if different from handler):\_\_\_\_\_

Owner's USCA membership#:\_\_\_\_\_ Expiration Date:\_\_\_\_\_

RELEASE STATEMENT: It is understood that every dog at this event will at all times be in the care and control of the dog's handler. It is further understood that the undersigned agrees to be fully responsible for the actions of his/her dog(s) action while on the trial grounds. I agree to hold Bay Area Schutzhund Club (BASC), as well as its members, officers, directors, and all property owners HARMLESS for loss or injury which may have allegedly been caused directly or indirectly to any person or thing by any act of my dog(s) or o dog(s) while on trial premises. I hereby assume all responsibility and liability for such claims. I further relinquish all claims and agree to hold BASC, as well as its members, officers, directors, and all property owners HARMLESS for loss or injury which may have allegedly been caused directly or indirectly to myself or my dog(s) during participation in this event.

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