GOLD COUNTRY WORKING DOG CLUB

IGP/RH Trial

with USCA Judge Paul Schneider on February 7, 2021

Location: Howard Park/ Gold Country Pet Resort Tracking location TBA; Start time TBD

MAIL ENTRY FORMS, FEES, & COPY of CURRENT USCA MEMBERSHIP CARD TO:

Cherie Flores, 6355 State Highway 104., Ione, CA 95640 or email it to goldcountrywdc@gmail.com Please make check payable to "Gold Country Working Dog Club" (No refunds unless event is cancelled).

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All entries due by January 31, 2019.

FEES: BH, OB I,II,III,: \$65.00 IGP I, II, III, RH: \$85.00

Additional Fees may apply if you meet one of the following criteria.

Per USCA new Administration Fees for trials. All non USCA members will pay additional \$50 for trial entry fees.

NOTE: All competitors are asked to meet at designated location at least 30 minutes before each start time for check in. current USCA membership card, and vaccination certificate may be required upon demand. All entries on this form must be completed and legible to be considered valid. Only competitors are asked to bring dogs. Anyone

exhibiting unsportsmanlike conduct will be dismissed from the field. We reserve the right to refuse any trial entry. As a courtesy, please confirm entrance space is available. Dog's Registered Name : Dog's Call Name (If Different): D.O.B. (Month/Date/Year):______ H.O.T (Handler Owned & Trained) Yes or No (circle) Breed: Sex (circle): M F Dog's Current Title/Degree (s): **ScoreBook # (must be USCA or AWDF recognized scorebook and certified by USCA,)**: **\$50 Scorebook bond payable to USCA is required. If the scorebook is not available on the date of trial or if not USCA certified. You will not be allowed to trial without a valid scorebook or check.** Dog's Registration # (ie. USCA , AKC, SV please include all letter and numbers at they appear on dogs papers)______ Dog's Tattoo/Microchip #_____ Handler Name: ______ Telephone () _____ Email_____ Address: ___ _____City_____State____Zip_____ Club Affiliation Handler USCA Member # (required)::____ ____ Expiration Date ___ Previous BH by Handler Yes or No (if no, be prepared to take the written exam day of trial) Date & Club where taken_____ Owner's Name and Address (if Different from Handler) Owner's USCA Membership #_____ Expiration Date_____ EVENT(S) ENTERED (circle applicable): BH OB1 OB2 OB3 TR 1 TR2 TR3 IPO1 IPO2 IPO3 AGREEMENT: I (we) the undersigned and all those who accompany me (us) hereby agree to waive and release the United Schutzhund Clubs of America, Gold Country Working Dog Club, it's employees, officers, members, agents, all property owners or lessors of the premises of said event, as well as the city of Ione, the county of Amador and any employees of the aforementioned parties from any and all liability of any nature for loss, injury, or damage which I (we) or my dog(s) may suffer, including specifically, but without limitation to, any injury or damage resulting from the action of my dog, and I (we) expressly assume the risk of such injury or

damage while in or upon event grounds or near any entrance thereto for myself and all those that accompany me to this event.

Owner/Handler Signature: