

**COAL MOUNTAIN SCHUTZHUND ASSOCIATION
CLUB TRIAL ENTRY FORM**

Event Date: December 12-13, 2020

Stanley Craddock USCA Judge

Handler Info	Name:			
	Address:			
	City:	State:	Postal Code:	Country:
	Telephone:	Fax:	E-Mail:	
	<i>If you are not a USCA member you MUST be a member of an AWFDF member club (e.g., DVG) or member of a WUSV recognized club (e.g., GSDCA) to enter the trial.</i>			
	USCA Membership #:	Exp. Date	Club Name:	
	<i>If permanent residence is outside the U.S., you must provide a WUSV Organization and Membership #:</i>			
Date and Location where Handler achieved BH:				

Dog Info	Registered Name:	Call Name:	SEX:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
	Date of Birth (Year/Month/Day):		Tattoo or Microchip #:		
	Registration #:	<input type="checkbox"/> USCA	<input type="checkbox"/> AKC	<input type="checkbox"/> Other Reg.:	Breed:
	USCA Scorebook#	Non-USCA Scorebook#			
	Working Titles:	HOT:			<input type="checkbox"/> Yes
<small>(Handler Owner Trainer)</small>					

Owner Info	<input type="checkbox"/> Check here if same as Handler				
	Name:				
	Address				
	City:	State:	Postal Code:	Country:	

Entry Fees	Check One	Event	Entry Fee	Check One	Event	Entry Fee	Check One	Event	Entry Fee	Payment Info
	<input type="checkbox"/>	IGP 1	\$80	<input type="checkbox"/>	UPr (OB) 1	\$65	<input type="checkbox"/>	BH VT	\$80	
<input type="checkbox"/>	IGP 2	\$80	<input type="checkbox"/>	UPr (OB) 2	\$65	<input type="checkbox"/>	STp 1	\$65		
<input type="checkbox"/>	IGP 3	\$80	<input type="checkbox"/>	UPr (OB) 3	\$65	<input type="checkbox"/>	STp 2	\$65		
<input type="checkbox"/>	GPR (Apr) 1	\$80	<input type="checkbox"/>	FH-V	\$80	<input type="checkbox"/>	STp 3	\$65		
<input type="checkbox"/>	GPR (Apr) 2	\$80	<input type="checkbox"/>	IFH	\$80	<input type="checkbox"/>	<i>Non-USCA members \$50 per title</i>			
<input type="checkbox"/>	GPR (Apr) 3	\$80	<input type="checkbox"/>	IFH 2	\$80					
<input type="checkbox"/>	FPr (TR) 1	\$65	<input type="checkbox"/>	IFP FH	\$80					
<input type="checkbox"/>	FPr (TR) 2	\$65	<input type="checkbox"/>	IGP V	\$80					
<input type="checkbox"/>	FPr (TR) 3	\$65	<input type="checkbox"/>	AD	\$80	Total				

Trial Entries may be limited due to limitations on available tracking.

Release Statement	(1) I will be fully and solely responsible for the actions of myself, my family and my dog(s) while engaged in any club activities, whether on club property, tracking fields, training grounds, competitions, shows or any other location;	<input type="checkbox"/> I have not had a positive COVID-19 Test result in the past 4 weeks
	(2) I will maintain control of and be responsible for the welfare of my dog(s) during all club-related activities;	<input type="checkbox"/> I feel well, have no fever, and no persistent cough
	(3) I hereby waive, release, hold harmless and defend this club, its officers, directors, members, guests, club and third-party trainers/educators, judges, agents, property owners and their successors from any and all claims of loss, injury or disease to myself, my family members, my property or my dog(s) arising directly or indirectly from, or in any way related to, participation in or attendance at any activities of this club whether on or off club property;	<input type="checkbox"/> If required, I will wear a face covering anytime I am in the presence of others
	(4) To the fullest extent permitted by law, I shall indemnify, hold harmless and defend this club, its officers, directors, members, guest, spectators, club and third-party trainers/educators, judges, agents, property owners and their successors and assigns from any and all claims of loss, injury or disease to any other person, dogs or property arising directly or indirectly from, or in any way related to, the participation of myself, my family or my dog(s) in, or attendance at, any activities of this club whether on or off club property;	<input type="checkbox"/> I will sanitize my hands with sanitizer or soap often
	(5) In case of emergency, the club may in its sole discretion authorize medical treatment for my family, my dog(s), or myself;	<input type="checkbox"/> I acknowledge that risk of contracting COVID-19 cannot be fully mitigated.
	(6) The club has my permission to take and use photographs, videotapes and other recordings of club activities involving myself, my family, or my dog(s) for any lawful purpose without compensation; and	<input type="checkbox"/> I accept any consequences from my choice to participate.
	(7) I will abide by club and event rules. The club hereby disclaims any undertaking to protect personal property, including vehicles and contents, equipment, cameras and valuables, from loss, theft, damage or vandalism and disavows any responsibility for any and all such losses that may occur at any club activity. By signing this form, I certify that my dog(s) are physically and mentally fit for training, competition, and contact with the public, dogs and other participants, have current rabies and other vaccinations and are free from all communicable disease.	

Signature: _____

Date: _____