

ENTRY FORM

STIRLING ACRES SHEEP DOG TRIAL

6845 Learmouth Rd., Coldstream, BC.

April 27th, 28th & 29th, 2019 Judge: John Palmer

Novice & Young Handler Class: \$35.00 per run (2 runs available)
Nursery: \$45.00 per run (3 runs available) (birthday on or after July 1, 2016)
Pro Novice: \$55.00 per run (2 runs available)
Open: \$60.00 per run (2 runs available)

NOTE: Above fees include sanctioning fees, paid take pen and set out people. **BC residents** who are not members of the BCSDA must pay a \$5 liability insurance fee per dog per run for open and pro novice runs. BCSDA membership is \$20 per year. Membership info. is available at: www.stockdog.bc.ca.

Handler: _____

Address: _____

Phone: _____ Email: _____

Dog: _____ Class _____ Fee: \$ _____ x _____ runs = \$ _____

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Liability insurance fees for **BC residents only** who are NOT BCSDA members (\$5 per dog per run in Open & PN) _____ runs X \$ 5.00 = \$ _____

Total fees: \$ _____

Entries must be postmarked on/after March 18th and before April 13th, 2019. No Refunds after April 13th.

Trial organizer reserves right to limit entries, cross entries and number of dogs per handler based on #s.

PAYMENT MUST ACCOMPANY ENTRY FORM

Cheque payable to Lee Lumb. Mail to: Lee Lumb 6845 Learmouth Rd. Coldstream, B.C. V1B 3G9 For info call Lee at 250-545-6730 or 250-308-6665 email: llumb@me.com.

STOCK DOG RELEASE FORM

STIRLING ACRES SHEEP DOG TRIAL, April 27, 28, 29, 2019. 6845 Learmouth Rd. Coldstream, B.C.

I hereby release from liability the trial committee, the property owners, and the exhibitors from any costs incurred as a result of damage to me, my property, and or my dog(s). My payment and signature acknowledge that I have read this form and that I accept liability for any cost incurred as a result of damages caused by me and/or my dog(s) to the facilities, sheep, other livestock, dog(s) or persons. Replacement cost of stock is \$250.00 per sheep and/or vet bills.

Signature of owner/handler: _____ Date: _____

Signature of Parent if handler is under age: _____