

NMSDA USBCHA TRIAL

JUNE 27, 2014 - JUNE 30, 2014

TRIAL IS SANCTIONED USBCHA AND NMSDA - ALL CLASSES WILL RUN 4 TIMES

TRIAL LOCATION – FREE TO BE RANCH – MOUNTAINAIR, NM, 87036

FOR INFO, DIRECTIONS, LODGING GO TO WEB PAGE www.ftbranch.com

ENTRIES OPEN POSTMARK MAY 9, 2014. ENTRIES CLOSE AND MUST BE POSTMARKED NO LATER THAN JUNE 12, 2014. NO REFUNDS AFTER JUNE 12, 2014. LATE ENTRIES MAY BE ACCEPTED BETWEEN JUNE 13, 2014 AND JUNE 20, 2014 FOR A LATE FEE OF \$10.00 PER HANDLER. ENTRIES AFTER JULY 20, 2014 MAY BE ACCEPTED IF SPACE IS AVAILABLE FOR A \$5.00 PER RUN FEE.

TRIAL WILL BE RUN ON FARM FLOCK - CLASSES - OPEN, OR, NURSERY, RANCH AND NOVICE

OPEN - \$30.00 OPEN RANCH - \$30.00 NURSERY - \$30.00 RANCH - \$30.00 NOVICE - \$30.00

NO PAYOUT IN ANY CLASS

EMAIL ADDRESS

HOME PHONE

DOGS NAME	CIRCLE CLASS	CIRCLE DATE	# RUNS CLASS FEE	\$ TOTAL PER DOG
	OPEN OR NUR RANCH NOV	27 28 29 30	X \$	\$
	OPEN OR NUR RANCH NOV	27 28 29 30	X \$	\$
	OPEN OR NUR RANCH NOV	27 28 29 30	X \$	\$
	OPEN OR NUR RANCH NOV	27 28 29 30	X \$	\$
	OPEN OR NUR RANCH NOV	27 28 29 30	X \$	\$
			LATE FEE	\$
			TOTAL	\$
MAKE CHECKS PA	YABLE TO : FREE TO BE RANCH TRIAI	L ACCOUNT		
MAIL ENTRIES TO	: FREE TO BE RANCH - PO BOX 782 -	- MOUNTAINAIR –	· NM – 87036	
HANDLER NAME_				
ADDRESS				

_____ CELL PHONE ____

WAIVER OF RESPONSIBILITY:

I AGREE TO HOLD FREE TO BE RANCH, GERI ABRAMS, ANY EMPLOYEE, AND/OR PROPERTY OWNER, HARMLESS FROM
ANY AND ALL CLAIMS FOR THE LOSS OR INJURY WHICH MAY BE ALLEGED TO HAVE BEEN CAUSED DIRECTLY OR
INDIRECTLY TO ANY PERSON, DOG, LIVESTOCK, OR THING WHILE IN OR AROUND THE PROPERTY/TRAINING AREA, OR
NEAR THE ENTRANCE THERETO AND I ASSUME ALL RESPONSIBILITY AND LIABILITY FOR ANY SUCH CLAIM. I FURTHER
AGREE TO HOLD THE AFOREMENTIONED PARTIES HARMLESS FROM ANY AND ALL CLAIMS FOR DAMAGES OR INJURIES
TO THE DOG(S) OR PERSON(S) INCURRED DUE TO NEGLIGENCE OF ANY OF THE AFOREMENTIONED PARTIES, OR BY THE
NEGLIGENCE OF ANY OTHER PERSON OR OTHER CAUSE OR CAUSES. IN CASE OF INJURY TO ANY LIVESTOCK I WILL
ASSUME FULL FINANCIAL RESPONSIBILITY FOR ANY AND ALL DAMAGES. I WILL PAY REPLACEMENT COST FOR ANY
LIVESTOCK KILLED, SERIOUSLY INJURED, OR THE MEDICAL BILLS IF SUCH IS REQUIRED.

SIGNED	DATE	