



Capital City Dog Sport Association™

Working Dog Competition Training Club established in 1979

August 17-18, 2024

DOG SPORTS OPEN

Entry Form

Owner Name (printed)

Dog's Name

Breed of Dog

Owner Address

City, State, Zip

Cell phone

E-mail address

Dog Club or Trainer Name

Performance/Event Titles previously earned on this Dog

Dog Club or Trainer Location (City & State)

Entry Requirements, Eligibility and Fees (make payable to CCDSA)

Entry Level: (check one)

BEGINNER

INTERMEDIATE

ADVANCED (sequestered)

Entry fee is \$50 per dog for each level entered. Day of trial entries are accepted from 8:00 a.m. to 9:00 a.m. ONLY as each day's trial will begin at 9:30 a.m. You may pre-enter by mailing a completed and signed form along with your check for entry fees made payable to Capital City Dog Sport Association (or CCDSA) to CCDSA Trial Secretary at 4215 S. Lowell Road in St. Johns, Michigan 48879. Any prior competitor (handler with SAME dog) in Beginning or Intermediate Level that placed 1st, 2nd or 3rd in class MUST move up to the next level. Please enter the correct category of entry. The Beginners level is for dogs and handlers that are still training ON LEASH developing their working skills. If your dog is trained in OFF LEASH OBEDIENCE, it is not a beginner. If your dog is TITLED in ANY biting sport such as Schutzhund/IGP, Ring Sport (French, Mondio, Belgian), PSA, K9 Pro Sports, UKC Dog Sport or anything similar, it is NOT a beginner. If the judges determine (based on their opinion only) you have entered the wrong category, your score will be nullified WITHOUT entry fee refund. Please be FAIR and CONSIDERATE and enter the proper level so ALL may enjoy their Dog Sports Open trialing experience.

Agreement to HOLD HARMLESS, WAIVER and ASSUMPTION of RISK

I, the undersigned, hereby acknowledge that I have voluntarily applied to participate in training activities offered by CAPITAL CITY DOG SPORT ASSOCIATION hereafter referred to as "CCDSA" or the "Association". I acknowledge that there are risks involved in bringing my dog into contact with other dogs, and in my participation in Association functions and events including the risk of my dog contracting a communicable disease and the risk of physical injury arising from an altercation with another dog, the condition of the training premises and grounds, and a wide range of other factors. I also understand that participation in such programs is not without risk to myself, members of my family or guests who may attend, or my dog, because some of the dogs to which I will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care. While the Association may take steps to reduce those risks, I acknowledge that it cannot and does not guarantee that they will be eliminated.

In consideration of and as inducement to the acceptance of my application for guest training and/or membership or for being permitted to participate in any CCDSA training programs and events, I hereby agree that I, my heirs, distributees, guardians, legal representatives, and assigns will not make a claim against, sue, attach the property of or prosecute the CAPITAL CITY DOG SPORT ASSOCIATION and/or any of its officers, members, agents or guests for any injuries or damage resulting to me, my animal(s) or my property from the negligence or other acts, however caused, by any member, agent, employee, or contractor of CCDSA, or as the result of my participation in any CCDSA activities. In addition, I hereby release and discharge CCDSA and/or its members from all actions, claims, or demands I, my heirs, distributees, assigns, guardians, or legal representatives now have or may in the future have for injury or damage resulting from my participation in this activity.

I also agree to indemnify and hold harmless Cher Car Kennels LLC, its directors, partners, operators, employees, clients, agents and guests from any and all claims, or claim made by any member of any family or any other person accompanying me to any activity or function as a result of any action by any dog or person, including my own, and I expressly assume the risk of such damage or injury or damage resulting from the action of any dog or person while attending any training session or any other function while on the training grounds or the surrounding area thereto including, but not limited to, 4215 S. Lowell Road, 4219 S. Lowell Road, 4219 1/2 S. Lowell Road, 4235 S. Lowell Road and 4305 S. Lowell Road in Saint Johns, Michigan and I agree to indemnify and hold harmless any and all legal owners of said identified property.

I certify the accuracy of all information given about my dog and specifically represent that I am the sole owner, and I acknowledge sole responsible for any and all acts or behavior of my dog. My dog is up to date on vaccinations for Rabies and DHLPPC (canine distemper, hepatitis, leptospirosis, parvovirus, parainfluenza and corona virus).

I further understand and agree to not use any drug or alcohol before, during or after my attendance or participation in any activity or function on the training grounds or the surrounding area thereto and acknowledge that my participation in such use will result in immediate dismissal from any activity (without refund) and expulsion from the grounds.

I, the undersigned, have read, understand and agree to ALL CONDITIONS detailed above.

Owner/Handler Name (printed)

Owner/Handler Signature

Date

Guardian/Parent Name for underage handler

Guardian/Parent Authority by Signature

Date