



AMERICAN
KENNEL CLUB®

Qualified Courser Certificate

Instructions: This form is to be used when a hound successfully completes the Qualified Courser Test at an AKC® Lure Coursing event. A hound must have received this certification within one year of the closing date of the trial being entered to be eligible to compete in an AKC Lure Coursing Trial in the Open or Open Veteran stake. This form must be properly completed and submitted along with this hound's first entry in an AKC Lure Coursing Trial in either stake.

* Hounds who have earned a Field Championship from either the American Sighthound Field Association (ASFA) or the Canadian Kennel Club (CKC) are exempt from this requirement. A copy of the applicable FC certificate must accompany the first entry of these hounds.

To be completed by owner/agent:

Breed _____

AKC Registered Name _____

AKC Registration Number _____

I hereby certify that the hound running in the Qualifying Course is the hound identified above and the information provided is true and correct.

Printed Name of Owner/Agent _____

Signature of Owner/Agent _____ Date _____

To be completed by certifying judge:

I hereby certify that the above referenced hound passed the Qualified Courser Test by running clean with another hound of the same breed or one with a similar running style completing a course a minimum of 600 yards.

Judge's Printed Name _____ Judge's Number _____

Judge's Signature _____ Date _____

PRE-ENTRIES CLOSE AT 6:00 PM ON JULY 18, 2015
Mail to: Field Secretary, Emily Miller, c/o Sheryl Bartel, 8510 S.E. 58th Ave., Portland, OR 97206

**DAY OF TRIAL ENTRIES CLOSE 25 JULY 5 MIN AFTER THE LAST QC/JC TEST DOG HAS RUN:
AT THE TRIAL SECRETARY'S DESK**

GREYHOUND CLUB OF AMERICA, INC

EVENT #2015192505
SPECIALTY LURE COURSING TRIAL LIMITED TO GREYHOUNDS,
LURE COURSING JC & QC TESTS - SIGHTHOUNDS.

LICENSED BY THE AMERICAN KENNEL CLUB



SATURDAY 25 JULY 2015
Cabrillo High School
4350 Constellation Rd, Vandenburg Village CA. 93436

ENTRY FEES: JC Test & QC Certification - \$20 Pre-entry, \$25 day of trial.
Trial - \$25.00 Pre-entry. \$20.00 each additional hound (from same owner)
\$30.00 day of trial. (\$25 for Hounds completing QC on day of trial).
Fun runs - \$3 each, as allowed by time.

GATE ENTRY CLOSURE TIMES: JC Test and QC Certification entries close at 1:00 PM on day of Test; Trial Entries close 5 minutes after the conclusion of the JC Test and QC certification runs. If there are no JC Test or QC Certification runs, Trial entries will close at 1:00 PM. Test/Trial Hours: 1 PM until completion of trial and awards.

MAIL LURE COURSING ENTRIES AND FEES TO:

Field Secretary, Emily Miller, 918-914-3664
c/o Sheryl Bartel, 8510 S.E. 58th Ave Portland, OR 97206

Permission has been granted by the American Kennel Club for the holding of this event under The American Kennel Club Rules and Regulations.
James P. Crowley, Secretary.

THIS CLUB DOES NOT AGREE TO ARBITRATE CLAIMS AS SET FORTH ON THE OFFICIAL AKC ENTRY FOR THIS EVENT.

GREYHOUND CLUB OF AMERICA, INC

President Dani Edgerton
 Vice President Robert Paust
 Treasurer Joan Malak
 Recording Secretary Karen Dayberry
 Corresponding Secretary. Patti Clark, 25 Point O Rocks Rd., Newtown, CT 06470
 Board Of Directors: Sheryl Bartel, Thomas Butler, David Klein, Cynthia Swanson
 Delegate To The AKC: Melanie Steele

Field Committee

Field Chairman: Beth Anne Gordon, PO Box 850, La Luz, NM 88337
 jsgordon@wildblue.net (575) 491-0398
 Field Secretary: Emily Miller, herahounds@gmail.com. 918-914-3664
 Lure Operator: Mo Aiken
 Inspection Committee: Lisa Stine, Donna Arcaro
 Huntmaster..... Audrey Hsia/Tamara Depue
 Paddock Master..... Ellen Cobleigh//Helen Hamilton
 Field Clerk Elissa Thompson

Judges and Assignments: TEST & TRIAL

Al Crume (Judge #17148) & Mary Crume (Judge #ZC266). 1555 LYLE LN
 PASO ROBLES, CA 93446-9321. (805) 237-9569
 Trial Hours: 1:00 PM until 6:00 PM.

Day of Trial/Test Entries: JC Test and QC Certification entries close at 1:00 PM on day of Test; Trial Entries close 5 minutes after the conclusion of the JC Test and QC certification runs.

ROLL CALL & INSPECTION: JC and QC Test, 1:00 PM; Trial, 5 minutes after Trial entries close.

Entries will not be acknowledged by mail. Late, incomplete, unpaid, or unsigned entries will not be accepted.

QC and JC tests will be run prior to the field trial.

Eligibility: JC & QC Test - Only sighthounds, that are one year of age or older, that have been registered with The American Kennel Club, or an AKC recognized foreign registry or that have been granted an Indefinite Listing Privilege (ILP) or Purebred Alternative Listing (PAL) may be entered in the tests. Breed disqualifications apply. Spayed or neutered hounds may enter.

TRIAL: Only purebred Greyhounds that are one year of age or older and have been registered with the American Kennel Club or an AKC recognized foreign registry or that have been granted an Indefinite Listing Privilege (ILP) or Purebred Alternative Listing (PAL) may be entered in the trial. All hounds will be run twice, in trios if possible or braces unless excused, dismissed, or disqualified. Bitches in season and lame hounds will be excused. Hounds not present at the time of roll call will be scratched after a 5 minute grace period.

Battery powered, continuous loop lure machines will be used. The lure will consist of white plastic strips. Backup equipment will be available. The course will be reversed for the finals, run-offs, and Best of Breed. The members of the Greyhound Club of America, Inc reserve the right to alter the course plan as required by weather and/or field conditions on the day of the trial.

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 There will be a \$5.00 fine assessed for any loose hound not taking part in a course in progress.

GCA assumes no liability for injury to any person or dog before, during or after the Test and Trial.

**RIBBONS AND TROPHIES**

Best of Breed Purple and Gold Rosette.

First Place Blue Rosette, Second Place Red, Third Place Yellow, Fourth Place White, Fifth Place Pink.

Each hound passing a Junior Courser or Qualified Courser Test shall be awarded a Dark Green Qualifying Ribbon or Rosette.

Rosettes for Best Veteran, and Best Dual Champion, and Highest scoring Conformation Champion.

**TRIAL TROPHIES:**

Best of Breed: The Perpetual Suntiger Trophy is offered for Best of Breed. For permanent possession it must be won three times by the same owner, not necessarily with the same dog. To be awarded at the Greyhound Club of America Western Specialty Lure Coursing Trial.

**BEST OF BREED:** Sarah Snavelly Hanging Wall Box donated by Sarah Snavelly. A Goldtone ribboned medallion is offered by GCA. Additional funds provided by **Rita and Bryan Rice**, Aria Borzoi.

**OPEN STAKE:** First - A Sarah Snavelly Mug - offered by GCA .  
 Second Place: Tapestry Greyhound Collar, Third – Fifth: Toy. 2nd through 5th offered by **Patricia Gail Burnham** in honor of Ch Suntiger Silver Falcon CD.

**SPECIALS STAKE:** First place - A Sarah Snavelly Mug, is offered by **Jackie Woods**, in honor of FC ZD Fidelis Ivy, BOB 2007 Southern Specialty Trial.  
 Second Place: Tapestry Greyhound Collar, Third – Fifth: Toy. 2nd-5th offered by **Ellen Cobleigh & Mike Cosgrove**, in memory of WW Time Zone SC, JOR.

**VETERANS STAKE:** First place: Sarah Snavelly Mug, Second Place: Tapestry Greyhound Collar, Third – Fifth: Toy. All offered by **Penny Bolt**, in memory of Dharma, Ch Wyndkist Lavendar Lace SC JOR.

**SINGLES STAKE:** First place: Sarah Snavelly Mug offered by GCA.  
 Second Place: Leather Collar handmade and donated by **Lisa Stine**.  
 Third – Fifth: Toy offered by GCA

Additional prizes: (for entries from the Open, Specials, and Veterans Stakes)

**HIGH SCORING BENCH CHAMPION**, Sarah Snavelly Rabbit Tile - offered by **Faith Burnham**.

**HIGH SCORING NGA GREYHOUND** Sarah Snavelly Rabbit Tile - jointly sponsored by: **United Greyhound Racing** to promote and support the adoption of retired racing greyhounds & **Jackie Gaithe** memory of Kid's Moonshine, who loved to run!

**HIGH SCORING AMATEUR RACER:** (must be pointed in LGRA or NOTRA amateur racing). Sarah Snavelly Rabbit Tile, offered by **Ellen Cobleigh & Mike Cosgrove**, in memory of WW Time Zone SC JOR

Lunge whip with fur lure donated by **Lisa Stine**.

**HIGH SCORING OBEDIENCE TITLED GREYHOUND** (must have an AKC Obedience or Rally title) - Lunge whip with fur lure donated by **Lisa Stine**.

**TESTS OFFERED:****JUNIOR COURSER TEST**

Open to Sighthounds at least 12 months of age. A hound running alone shall receive a certification from a judge assigned to one test and a second certification from a different judge assigned to another test, stating that the hound completed a 600-yard course with a minimum of four turns. The hound must complete the course with enthusiasm and without interruption.

**QUALIFIED COURSER TEST- NEW RULE AS OF 01.01.10**

A hound at least 12 months of age (Qualifying Hound) running with another hound of the same breed or another breed with a similar running style (Testing Hound) shall receive certification from a licensed judge. The hound must complete the course with enthusiasm and without interruption, sufficiently course the lure and not the Testing Hound. The judge will certify that the Qualifying Hound ran cleanly and did not appear to present a hazard to the Testing Hound at any point in the qualifying course. This certification is required to enter a hound in an Open Stake. The handler presenting the Qualifying Hound shall be responsible for providing the Testing Hound for the qualifying course. It is strongly recommended that every Qualifying Hound has been run previously alone and that to the handler's satisfaction runs cleanly and keenly. It is additionally recommended that every Qualifying Hound practices with other hounds prior to being presented for a qualifying courser test. It is to be understood by all that training prior to running a hound with other hounds in competition is essential to ensure that the hound is prepared to run safely with other hounds.

**STAKES OFFERED: (Greyhound Trial)**

**OPEN STAKE:** Open to all greyhounds that have obtained an AKC Qualified Courser certificate. This requirement will be waived for hounds that have earned a Field Championship title from the American Sighthound Field Association (ASFA) or the Canadian Kennel Club (CKC). ASFA or CKC Field Champions must submit a copy of their title certificate to the host club when they enter their first AKC Open Stake. This copy must be included when the results of the trial are sent to AKC. Championship points earned from the Open Stake will only count toward a Field Champion title. Hounds that have earned an AKC Field Championship title are not eligible to enter the Open Stake.

**SPECIALS STAKE:** Open to all greyhounds that have earned their AKC Field Championship titles. Championship points earned from the Specials Stake will count toward Lure Courser Excellent titles. Qualifying scores earned from the Specials Stake will count toward a Senior Courser or Master Courser title.

**VETERAN STAKE:** Open to all greyhounds which are eligible to enter Open or Special Stakes and are 6 years of age. Points won from the Veteran Stake may count toward either a Field Championship title or Lure Courser Excellent title. Qualifying scores earned from the Veterans Stake will count toward a Senior Courser or Master Courser title.

**SINGLES STAKE:** Open to all sighthound breeds approved to participate in AKC Lure Coursing trials. Hounds with breed disqualifications are eligible to enter, as are hounds that have been disqualified by a judge for being aggressive to another dog while coursing.

After the stake winners are all decided, the winners of each stake will be run in trios if possible, or braces, if necessary for BOB.

**THE FIELD IS COMPLETELY FENCED. PLEASE BRING YOUR OWN SHADE AND WATER. NO OVERNIGHT PARKING PERMITTED. NO HOOKUPS. PORTA-POTTI WILL BE AVAILABLE.**

**This trial is possible with the cooperation of the Lompoc Valley School District. Please be considerate of their property by following all directions regarding parking and field access. Pick up after your hounds and place all trash in the containers provided. We have to vacate by a specific time so everyone's help in clean-up and field tear down is desired.**

Course plan: 703 yds, (Course will be reversed for finals, runoffs & BOB)

**FIELD DIRECTIONS**

**From Lompoc:** go East on H street to Highway 1. Turn North (left) on Highway 1. Turn right on Constellation Road and follow Constellation to the school.

**VETERINARIAN**

**VILLAGE VETERINARY CLINIC**, 3883 Constellation Road, Lompoc, CA 93436, 805.733.3548. M-F 8AM-6pm, Sat 9AM - 12PM.

**After hours:**

**Central Coast Pet Emergency Clinic**, 1558 West Branch Street, Arroyo Grande, CA 93420-1818. (805) 489-6573 - 40.5 miles

Directions: Follow Trial Directions, taking Constellation back to US-highway 1. Go North on Highway 1 (Cabrillo Highway). After 4.4 miles Turn RIGHT onto CA-1 N/VANDENBERG RD/CABRILLO HWY/CR-520 N. Follow CA-1 N/CABRILLO HWY 9.6 miles and take CA-135 N/ORCUTT EXPY toward ORCUTT/SANTA MARIA. Go straight on Hwy 135, 5.4 miles through Santa Maria to E. Betteravia. Turn R on Betteravia and go 1.1 miles to US 101. Go North on US 101 17.9 miles to Briscoe RD. Exit 187B. Turn right on Briscoe, and then left on W. Branch St. Hospital is on the Right, 1558 West Branch.

**OFFICIAL AMERICAN KENNEL CLUB LURE COURSING ENTRY FORM**

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| Club: <b>Greyhound Club of America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | Date: <b>25 July 2015</b>                                                                | Event #: <b>2015192505</b>                      |                                                  |
| Location: <b>LOMPOC, CA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  | Event type (test or trial): <input type="checkbox"/> Test <input type="checkbox"/> Trial |                                                 |                                                  |
| Stakes: <input type="checkbox"/> JC <input type="checkbox"/> CAT <input type="checkbox"/> Singles<br><input type="checkbox"/> QC <input type="checkbox"/> Open <input type="checkbox"/> Special <input type="checkbox"/> Veteran                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  | Breed:                                                                                   | I enclose entry fees in the amount of: \$ _____ |                                                  |
| Breeder:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | AKC No:                          | Sex:                                                                                     | Date of Birth:                                  |                                                  |
| <b>Call Name:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | AKC No. <input type="checkbox"/> | CP <input type="checkbox"/>                                                              | PAL/ILP No. <input type="checkbox"/>            | Foreign & List Country: <input type="checkbox"/> |
| <b>Full Name of Dog:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |                                                                                          |                                                 |                                                  |
| Sire:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                                                                                          |                                                 |                                                  |
| Dam:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  |                                                                                          |                                                 |                                                  |
| Actual Owner(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| Owner's Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  | State:                                                                                   | Zip:                                            |                                                  |
| Name of Owner's Agent/Handler (if any) at Trial:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| <input type="checkbox"/> Please Separate My Entries.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  |                                                                                          |                                                 |                                                  |
| AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club website: <a href="http://www.akc.org">www.akc.org</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                  |                                                                                          |                                                 |                                                  |
| <b>AGREEMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules and regulations of The American Kennel Club in effect at the time of this event, and any additional rules and regulations appearing in the premium list of this event and entry form and any decision made in accord with them. I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies, I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim; and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or damage to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons. <b>I (WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND THE EVENT-GIVING CLUB (UNLESS OTHERWISE STATED IN THIS PREMIUM LIST) AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE RULES OF THE AMERICAN ARBITRATION ASSOCIATION. HOWEVER, PRIOR TO ARBITRATION ALL APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES, REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.</b> |                                  |                                                                                          |                                                 |                                                  |
| Signature of owner or agent duly authorized to make this entry: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                                                                                          |                                                 |                                                  |
| Tel:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  | Email:                                                                                   |                                                 |                                                  |

**OFFICIAL AMERICAN KENNEL CLUB LURE COURSING ENTRY FORM**

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| Club: <b>Greyhound Club of America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | Date: <b>25 July 2015</b>                                                                | Event #: <b>2015192505</b>                      |                                                  |
| Location: <b>LOMPOC, CA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  | Event type (test or trial): <input type="checkbox"/> Test <input type="checkbox"/> Trial |                                                 |                                                  |
| Stakes: <input type="checkbox"/> JC <input type="checkbox"/> CAT <input type="checkbox"/> Singles<br><input type="checkbox"/> QC <input type="checkbox"/> Open <input type="checkbox"/> Special <input type="checkbox"/> Veteran                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  | Breed:                                                                                   | I enclose entry fees in the amount of: \$ _____ |                                                  |
| Breeder:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | AKC No:                          | Sex:                                                                                     | Date of Birth:                                  |                                                  |
| <b>Call Name:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | AKC No. <input type="checkbox"/> | CP <input type="checkbox"/>                                                              | PAL/ILP No. <input type="checkbox"/>            | Foreign & List Country: <input type="checkbox"/> |
| <b>Full Name of Dog:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |                                                                                          |                                                 |                                                  |
| Sire:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                                                                                          |                                                 |                                                  |
| Dam:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  |                                                                                          |                                                 |                                                  |
| Actual Owner(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| Owner's Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  | State:                                                                                   | Zip:                                            |                                                  |
| Name of Owner's Agent/Handler (if any) at Trial:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| <input type="checkbox"/> Please Separate My Entries.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  |                                                                                          |                                                 |                                                  |
| AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club website: <a href="http://www.akc.org">www.akc.org</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                  |                                                                                          |                                                 |                                                  |
| <b>AGREEMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                          |                                                 |                                                  |
| I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules and regulations of The American Kennel Club in effect at the time of this event, and any additional rules and regulations appearing in the premium list of this event and entry form and any decision made in accord with them. I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies, I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim; and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or damage to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons. <b>I (WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND THE EVENT-GIVING CLUB (UNLESS OTHERWISE STATED IN THIS PREMIUM LIST) AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE RULES OF THE AMERICAN ARBITRATION ASSOCIATION. HOWEVER, PRIOR TO ARBITRATION ALL APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES, REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.</b> |                                  |                                                                                          |                                                 |                                                  |
| Signature of owner or agent duly authorized to make this entry: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                                                                                          |                                                 |                                                  |
| Tel:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  | Email:                                                                                   |                                                 |                                                  |