



65 State Route 44

Hartville , OH 44632

countylinehundesport@yahoo.com



Trial Date: September 19-21, 2025

Judge: Al Govednik

Owner Name: _____ USCA Membership #: _____

Address: _____

Phone: _____ Email: _____ H.O.T?: _____

Handler Name: _____ USCA Membership #: _____

Address: _____

Dog's Name: _____ Sex: ____ DOB: _____

Reg. Number: _____ Scorebook # _____

Breed: _____ Tattoo or Microchip Number: _____

Title(s) Entering: _____ Highest title earned _____

Date/Club where **handler** earned BH: _____

I understand this event will be conducted in accordance with the current USCA/VDH rules and regulations as administered by the United Schutzhund Clubs of America. In consideration for acceptance of this entry, I agree to abide by these rules, regulations and decisions. It is further understood that the trial chairperson has the right to dismiss any dog or handler for violation of the rules or for unsportsmanlike conduct. In the event of dismissal, any entry fees will not be refunded. I am fully familiar with risks associated with this type of event, including risk of injury to myself and/or my dog. I voluntarily assume these risks and agree to hold the organizers, Countyline Hundesport, its officers, directors, employees and agents harmless from any claim for injury or losses I may sustain as a participant or guest at this event.

I represent that I am over the age of 18 and am otherwise mentally and legally competent to execute this agreement.

ENTRY FEES

IGP/USP 1-3 \$75

IGP FH \$75

IFH /FH-V \$75

BH/AD \$60

GPR 1-3 \$60

FPR 1-3 \$50

UPR 1- 3 \$50

Please send:

- Entry Form & Fee**
- Copy of USCA Membership Card**
- Copy of Dog's Scorebook**
- Proof of Rabies**

To

**Countyline Hundesport c/o
JoAnna Bratt
5136 Rustic Hills Dr.**

***Make checks out to:**

Countyline Hundesport

***PayPal (Friends & Family) to:**

CountylineHundesport@yahoo.com

Medina, Ohio 44256

216-272-5222

Signature of Owner/Handler _____ Date _____

