

ORGAN MOUNTAIN SCHUTZHUND CLUB IGP TRIAL

Saturday October 4th, 2025

ORGAN MOUNTAIN SCHUTZHUND CLUB

ENTRY FORM

Name of Handler: _____

Name of Dog: _____ Breed: _____ M/F: _____

DOB: _____ Current Titles: _____

Scorebook Number: _____ Reg. Number: _____

Tattoo/Microchip Number: _____

Handler USCA Number: _____ Exp. Date: _____

Address/zip: _____

Phone Number: _____ Dog Owner if different: _____

Please Circle Title(s):

IGP I IGP II IGP III

BH-VT

GPR I GPR II GPR III

UPR I UPR II UPR III

Entry fee: \$85 + \$45 for each additional title Number of Titles Entered: _____

Total Collected: _____

Non USCA members add \$50

I have read and signed the release form. Yes / No Please Initial Here: _____

Trial Location: OMSC field at 6085 Porter Drive, Las Cruces, NM 88012

Tracking Location: to be announced (dirt field/orchard)

Contacts

Lesley Maguire 575 644-9615 top-k9@comcast.net

You may contact me and give me the above information prior to the deadline, and can sign liability form when you arrive.

Damage and Liability Release

In consideration of accepting my entry I agree to abide by the rules and regulations of Organ Mountain Schutzhund Club. I further agree that the OMSC have the right to refuse my entry for cause which the club shall deem to be sufficient. In consideration of my entry I agree to hold the OMSC and or the United Schutzhund Clubs of America, Inc., their members, directors, officers, agents and employees of the aforementioned parties harmless from any claim for loss or injury which may be alleged to have the caused directly or indirectly to any person or thing by my actions or the actions of my dog(s) while in or upon the premises or grounds or near any entrance thereto, and I shall personally assume all responsibility and liability for any such claim.

I further agree to hold the parties harmless from any claim for loss of my dog(s) by disappearance, theft, damage or injury caused or alleged to be caused by the negligence of the club or any person, or any other cause or causes.

I certify and represent that my dog(s) is/are not a hazard to persons or other dogs. My entry is submitted for acceptance on the foregoing representation and agreement.

Name of Owner: _____
Address: _____
Signature: _____
Date: _____

Hotel Accommodations

Super 8 by Wyndham Las Cruces

3405 Bataan Memorial
Las Cruces NM 80012
(575) 382-1490
Cost: \$ 70 + tax and \$10 pet fee

Cost: \$ 76 + tax (No pet fee)

Staybridge Suites Las Cruces

2651 Northrise Drive
Las Cruces, NM 88011
(575) 521-7999
Cost: \$134 + tax and (\$ 25 pet fee)

Motel 6 Las Cruces

2120 Summit CT
Las Cruces, NM 88011
(575) 525-2055

**On Site RV Parking Available - Call for
Details**