**THE GREATER PHILADELPHIA SCHUTZHUND CLUB**



**Helper Classification & NE Regional Tryout**

**July 22, 2023 Teaching Helper: USCA Pedro Jimenez**

**47 Ridge Road Telford, PA 18969**

**NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**USCA Member #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Helper Book #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Will you have a dog?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ What Level is the dog?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please send to: **Barbara Hill Po Box 1 Tylersport, PA 18971 RYB44@aol.com**

\_\_\_\_\_\_\_\_ Entry Form Classification: Yes\_\_\_\_\_\_ No\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ Copy of USCA member Card NE Reg Tryout: Yes\_\_\_\_\_\_ No\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ Copy of Helper Book

**I understand this event will be conducted in accordance with the current VDH rules and regulations as administered by 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 VDH rules or for unsportsmanlike conduct. In the event of dismissal, any entry fees will not be refunded. I am fully familiar with the risks associated with this type of event, including risk to myself and/or my dog. I voluntarily assume these risks and agree to hold the organizers, GPSC, 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.**

**Signature of Owner/Handler\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**