

TELEPHONE:

CITY/STATE/ZIP: \_\_\_\_\_

## BLACKOUT K9 WORKING DOG CLUB MODKING DOCS OF AMEDICA TRIAL

* 70 100 000	WORKING DOGS OF AMERICA TRIAL						
	TRIAL DATE	Oct 4-2025	LOCATION	491 Smith Rd.			
* * * *	FEE PER CLASS	FO's & OB's \$70.00		Maysville, NC 28555			
WORKING DOG CLUB		Protection titles \$85.00	JUDGE	Rusty Vineyard			
Entries will be accepted until 9:00 am on trial day if space is available. An additional \$20 fee may be added for entries received after the closing date. Entries will be limited. Entry fees will only be refunded if trial has been cancelled.  All dogs must be registered with WDA at least one week prior to the trial date. Click here to	ENTRY DEADLINE  MAIL ENTRY FORM AND FEE TO:	Sept. 27-2025  Haley Barkley 218 Yaupon Drive Jacksonville, NC 28546  Venmo payment to: Habarkley	DECOYS	Chris Menger & Hadassah Gingerich  Haley Barkley 443-569-2655 blackoutwdc@gmail.com			
register a dog.							
DOG'S REGISTERED NAME:							
DOG'S CALL NAME (if different):							
DOG'S WDA REGISTRATION #:							
BREED:		SEX	X Male	Female			
COAT COLOR:							
DATE OF BIRTH:							
CURRENT TITLE/DEGREE(S):							
SIRE'S NAME:							
DAM'S NAME:							
OWNER'S NAME:							
HANDLER'S NAME:							
OWNER'S ADDRESS:							
CITY/CTATE/7ID:							

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TITLES ENT	ERED Che	ck one per e	entry form							
Obedience Titles		<b>Protection Sport Titles</b>			<b>Protection Titles</b>		Police Dog 7	Police Dog Titles		
FO	OB1	OB2	OB3	PS1	PS2	PS3	P1	P2	PD1	PD1
						Please indicate if dog grips one of these alternate locations:				
	PS	PSOB1	PSOB2	PSOB3		Lowe	er Body	Inner Arm		

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RELEASE: I (we) the undersigned and all those who accompany me (us) hereby agree to waive and release Working Dogs of America, Blackout K9, its employees, officers, members, agents, all property owners of said event from any and all liability of any nature for loss, injury or damage which I (we) or my dog(s) may cause or suffer, while in/on the event grounds or near any entrance thereto to myself or my dog(s) and all those that accompany me to this event. 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 Working Dogs of America organization in effect at the time of this event.

OWNER/HANDLER SIGNATURE: _	D	ATE: