



# SEQUOYAH K9 and SALTY SHEPHERDS WORKING DOGS OF AMERICA TRIAL

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 register a dog.](#)**

TRIAL DATE	November 15 & 16, 2025
FEE PER CLASS	\$81.00
ENTRY DEADLINE	November 1, 2025 <del>Q: A @ } A a A ^ a a @ a D</del>
MAIL ENTRY FORM AND FEE TO:	Tom Cawood 7646 Hunter Road Hixon, TN 37343  <i>Make check payable to Sequoyah K9 Academy</i>

LOCATION	Sweetwater High School 414 South High Street Sweetwater, TN 37874
JUDGE	Barry Vradenburgh
DECOYS	Howard Johnson and Mike England
CONTACT	Tom Cawood tcawood@metroboilertu b e.com 423-991-9562

DOG'S REGISTERED NAME: \_\_\_\_\_

DOG'S CALL NAME (if different): \_\_\_\_\_

DOG'S WDA REGISTRATION #: \_\_\_\_\_

BREED: \_\_\_\_\_ SEX ☐ Male ☐ Female

COAT COLOR: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ Jump division: Div 3 Div 2 Div 1

CURRENT TITLE/DEGREE(S): \_\_\_\_\_

SIRE'S NAME: \_\_\_\_\_

DAM'S NAME: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

HANDLER'S NAME: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

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

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

TITLES ENTERED *Check one per entry form*

## Police Dog Titles only at this trial

PD1 PD2 PD3

**Please note: The trial will begin at 9:00 am both days. You must be present by 8:30 am.**

**Please indicate if dog grips one of these alternate locations:**

**Lower body Inner arm**



RELEASE: I (we) the undersigned and all those who accompany me (us) hereby agree to waive and release Working Dogs of America, Sequoyah K9 Academy, 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. 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: \_\_\_\_\_ DATE: \_\_\_\_\_