

USDAA® Official Entry Form - Agility Workout Society of Mid-Michigan - Whitmore Lake, MI

September 28 - 29, 2024 - Closing Date: Thursday, September 26, 2024

Return to: Aida Peterson, 9518 Rolling Greens Dr Pinckney, MI 48169 - Make check payable to: Agility Workout Society of Mid-Michigan

Dog and Handler Information

Dog's Call Name:	USDAA#:	Breed:	Height:	Birthdate:
Address:			City, St/Pr/Region:	
Postal Code:	Day Phone:	Night Phone:		
Handler:	Email:			

Class Entry Information

Jump Height:	Veteran: 4" 8" 12" 16"	Championship: 8" 12" 16" 20" 24"	Performance: 4" 8" 12" 16" 20"
--------------	------------------------	----------------------------------	--------------------------------

If entering more than one height for this dog, submit a SEPARATE ENTRY FORM for each height.

Saturday, Sep 28, 2024		Veteran			Championship			Performance		
	\$16.00	Standard	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Gamblers	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Jumpers	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Snooker	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Combined Pairs Relay	<input type="checkbox"/>	<input type="checkbox"/> Championship				<input type="checkbox"/> Performance		
If blank or incorrect, entry will be for draw team:										
		Partner:	Dog:			USDAA#:	Jump Height:			
	\$16.00	Combined Pairs Relay	<input type="checkbox"/>	<input type="checkbox"/> Championship - 2nd Run				<input type="checkbox"/> Performance - 2nd Run		
	\$25.00	Tournament Qualifier	<input type="checkbox"/> Purina® Pro Plan® Grand Prix of Dog Agility® (select program height class above)							

Sunday, Sep 29, 2024		Veteran			Championship			Performance		
	\$16.00	Standard	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Gamblers	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Jumpers	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$16.00	Snooker	<input type="checkbox"/>		<input type="checkbox"/> MST	<input type="checkbox"/> ADV	<input type="checkbox"/> STR	<input type="checkbox"/> PIII	<input type="checkbox"/> PII	<input type="checkbox"/> PI
	\$25.00	Tournament Qualifier	<input type="checkbox"/> Purina® Pro Plan® Dog Agility Steeplechase® (select program height class above)							

SUB-TOTAL

\$40.00 **Dog Registration (if not previously registered) - ATTACH SEPARATE FORM or Register Online**

Discount (see footnote below for terms, if any discount is offered)

TOTAL FEES

GENERAL AGREEMENT ACCEPTANCE: Through my signature, I declare that I have read USDAA Official Rules & Regulations, the rules & conditions for entry set forth for this event in the Event Details (a.k.a., Agility Test Schedule) as published on USDAA.com, and I acknowledge that I understand and agree to abide by all such rules, regulations, policies and provisions stipulated therein, including any provisions incorporated by reference.

Signature: _____ Date: _____
 Signature of Parent or
 Legal Guardian, if a Minor: _____ Date: _____

Emergency Contact Information

In case of an emergency, please contact:

Name: _____ Relationship: _____ Phone Number: _____