

Lynn Leach 2017 Herding Clinic

When: Tuesday, June 27-Thursday, 29, 2017

Where: Polly Simpson Farm, 1479 200th Ave New Richmond, WI 54017/Stock provided by Phyllis Clark

Clinic limit: 8 participants/day

Fees: \$135/day (preference given to 3-day registrations) or \$35/day to audit

Payment: 50% of total fee due on April 19, 2017

Final payment due May 24, 2017

Mail check to: Great Plains BCC, 5652 Clinton Ave. S. Mpls. MN 55419.

For questions or more info: contact Carol Serrine at cas4beardies@earthlink.net or Brian Wistrom at bwistrom@earthlink.net or phone 612-866-9014.

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Please fill out the entry form. Also, read and sign the waiver.

I will be attending the clinic on:

- 6/27 Tuesday
- 6/28 Wednesday
- 6/29 Thursday

I have enclosed \$_____.

Name

Address

Telephone _____ **Email** _____

Dog's Name _____ **Breed** _____

Please list what you would like to work on.

Waiver & Release: I understand that herding is a strenuous sport and a potentially hazardous activity and I state that my animals and I are in proper physical condition for this event. I also accept any and all other risks associated with the event including, but not limited to falls, contact with livestock, the effects of the weather and any other potentially hazardous conditions associated with the event and event site. Knowing these facts, and in consideration of accepting my entry, I hereby for myself, my heirs, executors, administrators, assigns or anyone else who might try to claim on my behalf, covenant not to sue, and waive, release and discharge the Great Plains Bearded Collie Club Board and Members and Lynn Leach and all hosts and sponsors, including but not limited to anyone acting for or on its behalf from any and all claims of liability, death, personal injury or property damage of any kind or nature arising out of, or in the course of my participation in this event. This release and waiver extends to all claims of every kind or nature, foreseen or unforeseen, known or unknown. I understand that I am responsible for any costs incurred as a result of damages caused by myself or my dog(s) to the facilities, other dogs, sheep and / or persons. I further acknowledge and understand that if damage occurs to the sheep caused by my dog(s) that I will pay a replacement cost of the stock of \$200 per sheep, or the cost up to \$200 incurred from veterinary care of the injured stock. My signature acknowledges that I have read this release and agree to the conditions set forth.

Signed _____ Date _____

* For more info about Lynn visit <http://downriver.org> .